DLN: 93493222020152

OMB No. 1545-0047

2020

Form **990**

Department of the Treasury Internal R

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

 \blacktriangleright Go to $\underline{\textit{www.irs.gov/Form990}}$ for instructions and the latest information.

Open to Public Inspection

| | | inic scrvic | | | | | | | | | |
|-----------------------------|------------------|--------------|---|--|------------------------|-----------------|-------------------------------|-------------------|-------------------------|--|--|
| | | | C Name of organization | beginning 10-01-2020 , and | ending 09-3 | 30-2021 | | | | | |
| | | pplicable: | INTERNATIONAL RESCUE CO | MMITTEE INC | | | D Employe | ' identifi | cation number | | |
| | aaress ame ch | change | | | | | 13-56608 | 370 | | | |
| | itial re | _ | Doing business as | | | | | | | | |
| _ | | n/terminated | d | | | | | | | | |
| □ Ar | mende | d return | Number and street (or P.O. b 122 EAST 42ND STREET | oox if mail is not delivered to street add | ress) Room/si | uite | E Telephone | number | | | |
| □ Ap | oplicati | on pending | 3 | | | | (212) 55 | 1-3000 | | | |
| | | | City or town, state or province New York, NY 10168 | ce, country, and ZIP or foreign postal co | ode | | | | | | |
| | | | | | | | G Gross rece | eipts \$ 97 | 70,342,913 | | |
| | | | F Name and address of p | rincipal officer: | | H(a) | Is this a group retu | ırn for | | | |
| | | | DAVID MILIBAND 122 E 42ND STREET | | | | subordinates? | | □Yes 🗹 No | | |
| | | | NEW YORK, NY 10168 | | | | Are all subordinate included? | S | ✓ Yes □No | | |
| I Ta | ax-exe | mpt status | : v 501(c)(3) | () ◀ (insert no.) ☐ 4947(a)(1) o | r 🗌 527 | | If "No," attach a lis | t. (see | instructions) | | |
| J W | /ebsit | te:▶ W\ | WW.RESCUE.ORG | | | 1 | Group exemption r | • | • | | |
| | | | | | | | | | | | |
| K For | m of o | rganization | n: 🗹 Corporation 🔲 Trust | Association ☐ Other ▶ | | L Year o | f formation: 1933 | M State o | of legal domicile: NY | | |
| | | | ' | | | | | | | | |
| Р | art I | Sum | nmary | | | | | | | | |
| | | | | ssion or most significant activities: | | | -1 | | d Barriela a de la colo | | |
| e e | | | | responds to the worlds worst hum urvive,recover,and gain control of | | ses and no | eips people whose | iives and | a livelinoods are | | |
| <u> </u> | : | | | | | | | | | | |
| E | - | | | | | | | | | | |
| Xe | _ ' | | 🗆 | | | | | | | | |
| Activities & Governance | | | | ion discontinued its operations or overning body (Part VI, line 1a) | | | | sets. 3 | 39 | | |
| ≫ | | | - | pers of the governing body (Part V | | | | 4 | 38 | | |
| ile s | | | , | , , | • | | | 5 | | | |
| <u> </u> | | | , , | d in calendar year 2020 (Part V, line if necessary) | • | | | - | 2,161 | | |
| AC | | | 6 | 2,230 | | | | | | | |
| | | | | m Part VIII, column (C), line 12 | | | • • | 7a | -1,256 | | |
| | b | Net unre | elated business taxable incon | ne from Form 990-T, line 39 . | | · • • | • • | 7b | | | |
| | | | | | | | Prior Year | | Current Year | | |
| ā, | 8 | Contribu | itions and grants (Part VIII, li | ne 1h) | | | 785,978,2 | 72 | 924,498,780 | | |
| Ravenue | 9 | Program | service revenue (Part VIII, li | ne 2g) | | | 11,844,76 | _ | 18,036,305 | | |
| Α̈́ς | 10 | Investm | ent income (Part VIII, columr | n (A), lines 3, 4, and 7d) | | | 4,323,35 | 51 | 4,622,894 | | |
| | 11 | Other re | venue (Part VIII, column (A), | lines 5, 6d, 8c, 9c, 10c, and 11e) | | | 3,128,7 | | 3,506,407 | | |
| | 12 | Total rev | venue—add lines 8 through 1 | .1 (must equal Part VIII, column (A | (), line 12) | | 805,275,15 | 59 | 950,664,386 | | |
| | 13 | Grants a | and similar amounts paid (Pa | rt IX, column (A), lines 1–3). | | | 273,684,09 | 91 | 354,959,789 | | |
| | 14 | Benefits | paid to or for members (Par | t IX, column (A), line 4) | | | | | 0 | | |
| \$2 | 15 | Salaries | , other compensation, emplo | yee benefits (Part IX, column (A), | lines 5–10) | | 382,534,00 | ,068 408,346,395 | | | |
| Expenses | 16a | Professi | onal fundraising fees (Part IX | (, column (A), line 11e) | | | 2,437,19 | 99 | 2,979,705 | | |
| <u>0</u> | b | Total fund | draising expenses (Part IX, colum | nn (D), line 25) ▶45,516,032 | | | | | | | |
| Щ | 17 | Other ex | penses (Part IX, column (A), | lines 11a-11d, 11f-24e) | | | 128,026,6: | LO | 137,861,152 | | |
| | 18 | Total ex | penses. Add lines 13–17 (mu | ust equal Part IX, column (A), line | 25) | | 786,681,96 | 58 | 904,147,041 | | |
| | | | , | e 18 from line 12 | | | 18,593,19 | 91 | 46,517,345 | | |
| × 0 | | | | | | Begi | nning of Current Ye | | End of Year | | |
| S C | | | | | | | _ | | | | |
| Net Assets or Fund Balances | 20 | Total ass | sets (Part X, line 16) | | | | 418,242,32 | 28 | 527,551,484 | | |
| 절 | 21 | Total lial | bilities (Part X, line 26) . | | | | 175,878,14 | 10 | 223,244,694 | | |
| žΞ | 22 | Net asse | ets or fund balances. Subtrac | t line 21 from line 20 | | | 242,364,18 | 38 | 304,306,790 | | |
| P | art II | Sign | nature Block | | | | | | | | |
| | | | | examined this return, including a | | | | | | | |
| | /ledge ‹nowl | | ef, it is true, correct, and cor | mplete. Declaration of preparer (o | ther than offi | icer) is ba | ased on all informat | ion of w | hich preparer has | | |
| uny i | (110111 | | | | | | | | | | |
| | | | | | | | 2022-08-10 | | | | |
| Sigr | | Signa | ture of officer | | | | Date | | | | |
| Her | е | | Raposo CFO | | | | | | | | |
| | | Туре | or print name and title | | | | | | | | |
| | | · | Print/Type preparer's name | Preparer's signature | | Date | | IN | _ | | |
| Pai | d | L | | | | 2022-08-1 | self-employed | 1517891 | | | |
| | par | er | Firm's name 🕨 KPMG | | | | Firm's EIN ► | _ | _ | | |
| | On | | Firm's address ▶ 345 Park Avenu | Phone no. (212) 71 | 58-0700 | | | | | | |
| | | · | | | one no. (212) 758-9700 | | | | | | |
| | | | New York, NY | | | | | | | | |
| | | | | er shown above? (see instructions |) | | | <u></u> | es 🗹 No | | |
| For I | Paper | rwork Re | eduction Act Notice, see th | ne separate instructions. | | Cat. | No. 11282Y | | Form 990 (2020) | | |

| Form | 990 (2020) | | | | | Page 2 | | | | | | | |
|------|------------------------|--|--------------------|---------------------------|---|--------------------------------|--|--|--|--|--|--|--|
| Pa | statement | of Program Serv | ice Accomplis | hments | | | | | | | | | |
| | Check if Sche | edule O contains a resi | oonse or note to a | any line in this Part III | | 🗹 | | | | | | | |
| 1 | | organization's mission | | , | | | | | | | | | |
| | | Committee responds to vive, recover, and gain | | | nd helps people whose lives an | d livelihoods are shattered by | | | | | | | |
| 2 | - | , - | | vices during the year wh | nich were not listed on | | | | | | | | |
| | the prior Form 990 o | 🗌 Yes 🗹 No | | | | | | | | | | | |
| | • | ese new services on S | | | | | | | | | | | |
| 3 | Did the organization | cease conducting, or | make significant | changes in how it condu | icts, any program | | | | | | | | |
| | services? | services? | | | | | | | | | | | |
| | If "Yes," describe the | ese changes on Sched | ule O. | | | | | | | | | | |
| 4 | Section 501(c)(3) ar | | ions are required | to report the amount of | largest program services, as n f grants and allocations to oth | | | | | | | | |
| | (Code: |) (Expenses \$ | 357,264,155 | including grants of \$ | 193,935,128) (Revenue \$ | 16,658,201) | | | | | | | |
| | See Additional Data | , (| | | | | | | | | | | |
| 4b | (Code: |) (Expenses \$ | 132,454,900 | including grants of \$ | 47,286,763) (Revenue \$ |) | | | | | | | |
| | See Additional Data | | | | | | | | | | | | |
| 4c | (Code: |) (Expenses \$ | 107,970,599 | including grants of \$ | 27,842,002) (Revenue \$ | 846,057) | | | | | | | |
| | See Additional Data | | | | | | | | | | | | |
| 4d | Other program serv | ices (Describe in Sche | dule O.) | | | | | | | | | | |
| | (Expenses \$ | 199,332,488 in | cluding grants of | \$ 69,510,6 | 05) (Revenue \$ | 532,047) | | | | | | | |
| 4e | Total program ser | vice expenses ► | 797,022,1 | 42 | | | | | | | | | |

18

19

20a

20b

21

Yes

Yes

Form **990** (2020)

Nο

Nο

| Pai | tiV Checklist of Required Schedules | | | - rage 3 |
|-----|---|-----|-----|-----------------|
| | Checking of Regulated Solication | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🔰 | 2 | Yes | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | 3 | | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | Yes | |
| 5 | Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D,</i> Part I | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | Yes | |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V | 10 | Yes | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. | | | |
| | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. | 11a | Yes | |
| | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞 | 11b | Yes | |
| | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | No |
| | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | No |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏 | 11e | Yes | |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | | No |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Yes | |
| 13 | Is the organization a school described in section $170(b)(1)(A)(ii)$? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | Yes | <u> </u> |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | Yes | |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | Yes | |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | Yes | |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | 17 | Yes | |

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

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| rm | 990 (2020) | | | Page 4 |
|-----|--|-----------|-----|----------|
| Par | Checklist of Required Schedules (continued) | | | |
| | | | Yes | No |
| 2 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | Yes | |
| :3 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | Yes | |
| 4a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | No |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | No |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | No |
| 5a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | 25b | | No |
| 6 | Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | No |
| .7 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III | 27 | | No |
| 8 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV | 28a | | No |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> | 28c | | No |
| 9 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \ref{Matter} | 29 | Yes | |
| 0 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 1 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| 2 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 32 | | No |
| 3 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | No |
| 4 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | Yes | |
| 5a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | Yes | |
| 6 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | Yes | |
| 7 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 8 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |
| Par | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | | | V |
| 1 ~ | Enter the number reported in Box 2 of Form 1006. Enter 0, if not applicable 14-1 | \square | Yes | No |
| | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 410 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0 | | | |
| IJ | Linter the number of Forms winds microaced in line tall entering in not applicable . TD U | ı I | | I |

1c

| Par | tV Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | rage 3 | | | | | |
|-----|--|------------|-----|---------------|--|--|--|--|--|
| | Enter the number of employees reported on Form W-3, Transmittal of Wage and | | | | | | | | |
| | Tax Statements, filed for the calendar year ending with or within the year covered by this return | | | | | | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Yes | | | | | | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | | | | | | |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | No | | | | | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | | | | | | | |
| | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | Yes | | | | | | |
| b | AF , BY , UV , CM , CD , CG , CO , BG , IV , BM , ET , ES , IZ , PK , TZ , TH , KE , UG , ZI , NG , NI , GR , SL , SU , OD | | | | | | | | |
| 5a | | 5a | | No | | | | | |
| b | Was the organization a party to a prohibited tax sheller transferred at Many Time Muring the dax Veach , UK, If Yes, enter the name of the foreign country: SW, CT, CO, SG, LY ST, LY ST, LY Steller the name of the foreign country: SW, CT, CO, SG, LY ST, L | 5b | | No | | | | | |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5с | | | | | | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6 a | | No | | | | | |
| b | b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | | | | | | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | | | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | Yes | | | | | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | Yes | | | | | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | No | | | | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | | | | | | | |
| е | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | | | | | | |
| f | ${f f}$ Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | | | | | | |
| g | g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | | | | | | | |
| h | 7h | Yes | | | | | | | |
| 8 | | | | | | | | | |
| Ū | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | | | | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | | | |
| | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | | | | | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | | | | | | |
| 10 | Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 | | | | | | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | | | | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | | | | | | |
| | Gross income from members or shareholders | | | | | | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | | | | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | | | | | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year. | | | | | | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | | | | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | | | | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans | | | | | | | | |
| С | Enter the amount of reserves on hand | | | | | | | | |
| 14a | 14a | | No | | | | | | |
| b | 14b | | | | | | | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? | 15 | Yes | | | | | | |
| 16 | If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . If "Yes," complete Form 4720, Schedule O. | 16 | | No | | | | | |

| Par | TVI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No | | | |
|-----|---|------------|-----------|--------------------|
| | 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI | • | onse to i | ines ✓ |
| Se | ction A. Governing Body and Management | | 1 | |
| 1. | Enter the number of voting members of the governing body at the end of the tax year 1a 39 | | Yes | No |
| Ia | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 38 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . | 3 | | No |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? . | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | | No |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | | No |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8 b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i> | 9 | | No |
| Se | ction B. Policies (This Section B requests information about policies not required by the Internal Revenue | e Code | | |
| 10- | Did the averagination have lead about any burnahas an affiliate. | 10a | Yes | No |
| | Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, | 10a | Yes | |
| D | and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | Yes | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| b | Other officers or key employees of the organization | 15b | Yes | |
| 16a | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt | 100 | | |
| | status with respect to such arrangements? | 16b | | |
| | ction C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , CO , CT , DC , FL , GA , , MA , MD , ME , MI , MN , MS , NC , ND , I , OK , OR , PA , RI , SC , TN , UT , VA , WA | NH , NJ | , NM , I | (Y , LA NY , OH |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. | | | |
| 19 | Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's books and records: •GETENET AYANO 122 EAST 42ND STREET NEW YORK, NY 10168 (212) 551-0971 | | 004 | - 15 |

Part VII

and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII . . .

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(A) (C) (D) (F) (B) (E) Name and title Estimated Average Position (do not check more Reportable Reportable than one box, unless person amount of other hours per compensation compensation is both an officer and a week (list from the from related compensation any hours director/trustee) organization organizations from the

| | for related | u 0 0 10 1, d. u.o 10 0, | | | | | | /W 2/1000 | (1) 2/1000 | organization and |
|---------------------------|--|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|---------------------|---------------------|--|
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099- MISC) | (W-2/1099- MISC) | organization and related organizations |
| See Additional Data Table | | | | | | | | | | |
| | | | | | | | | | | |
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| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | | | | | | |
|---|--|---|----------|---------|--------------------------|-------------------------|-------------|-------------|--------------------------------|--|--------------------------|--|------------------|---|--|
| Na | (A) me and title | (B) Average hours per week (list any hours | than o | one bo | ox, u n off tor/tr | t che Inles ficer | and a | son | Repo compe fron organ | D) ortable ensation n the nization /1099- | | (E) Reportab compensat from relat organizatio (W-2/109 | ion ed ons | Estim amount comper from organiza | nated of other nsation the |
| | | for related employee Highest compensated employee Cofficer Institutional Trustee Individual trustee Institutional Trustee | | | Former | | | | (W-2/109 MISC) | 9- | related organizations | | | | |
| See Additional Data | Table | | | | | \vdash | | | | | | | | | |
| | | | | | | | | \forall | | | | | | | |
| | | | | | | | | | | | | | | | |
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| | | | | | \sqcup | Щ | <u> </u> | \bigsqcup | | | | | | | |
| | | | | | | | | | | 1 | | | | | |
| 1b Sub-Total . c Total from c | ontinuation sheets to Pa | art VII, Section | A | | | | > | | | | | | | | |
| • | | | | | | | • | | | 67,328 | | | | | 525,669 |
| | er of individuals (including le compensation from the o | | | e liste | ed ab | oove | e) who | rece | eived mor | re than | \$10 | 0,000 | | | |
| | anization list any former c 'Yes," complete Schedule J | | | ee, ke | ey er | mplc | oyee, o | or hiç | ghest com | npensa | ted e | employee on | 3 | Yes Yes | No |
| organizatio | ividual listed on line 1a, is n and related organizations | | | | | | | | | | | the | 4 | | |
| | son listed on line 1a received | | | | | | | | | ion or i | indiv - | idual for | | 1 | |
| | ndependent Contracto | . , | | | | | | | _ | - | - | - | 5 | | No |
| 1 Complete th | his table for your five higher ganization. Report compen | est compensate | | | | | | | | | | | comper | nsation | |
| 110111. 0.10 2. | <u>- </u> | (A) Ind business addre | | y c.c. | C112. | . GIII | 771611 2. | 1 77.5 | Jim Gro C. | | | (B) ption of service | ac . | | C) ensation |
| KPMG LLP | 1104 | nd basiliess dat. | :33 | | | | | | | | | t Service | .5 | | 1,080,881 |
| PO Box 120511 Dallas, TX 75312 | | | | | | | | | | | | | | | |
| The Harrington Agen | cy LLC | | | | | | | | | Consultii | ng ar | d Advertising | | | 1,077,242 |
| 329 Dickinson Swarthmore, PA 19 | | | | | | | | | | iat. | | | | | 255 405 |
| THE KONTERRA GRC 700 12th Street NW Washington, DC 200 | STE 700 | | | | | | | | ľ | Consultii | ng | | | | 655,135 |
| JACKSON RIVER LLC | | | | | | | | | | Consultii | ng | | | | 549,790 |
| | 2535 13th St NW No 005 Washington, DC 20009 | | | | | | | | | | | | | | |
| ANNE LIEBERMAN CO | | | | | | | | | | Consultii | ng | | | | 162,000 |
| New York, NY 1002 | | o (includio a but | not lie- | itod t | | | licts - | <u> </u> | ٠٠٠ - طيبر (٥٠ | occiv | - سوا | 10 than #100 | 000 -6 | | |

| Part | | Statement | of F | Revenue | | | | | | Page 9 |
|--|--|---|------------|-----------------------------|-------------|-------------------------|------------------------|--|---|--|
| | | | | | respo | nse or note to any | line in this Part VIII | | <u> </u> | <u> </u> |
| | | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 |
| 50 X | 1a Federated campaigns 1a | | | | | 4,685,574 | | revenue | l | 312 311 |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues | • | | Lb | | | | | |
| 9 | | | | | Lc | 6,876,259 | | | | |
| ons, Gifts, Similar A | d Related organizations 1d | | | | | | | | | |
| s. G imil | | Government grants (| | <u> </u> | Le | 537,230,926 | | | | |
| lion r S | Т | All other contributions and similar amounts above | not ir | scludod | 1f | 375,706,021 | | | | |
| Contributio and Other | g | Noncash contribution: lines 1a - 1f:\$ | s incl | | | | | | | |
| ontr | L | | - 16 | | Lg | 10,381,620 | | | | |
| <u> </u> | n | Total. Add lines 1a | a-11 | • • • | • • | Business Code | 924,498,780 | | | |
| | 2a | US Agency for Intern | ation | al Developmen | t | | 12,488,339 | 12,488,339 | | |
| an | | | | | | 900099 | F 444 222 | 5 444 202 | | |
| Program Service Revenue | b | Department for Inter | natio | nal Developme | nt | 900099 | 5,441,282 | 5,441,282 | | |
| e. Ba | c | UNICEF | | | | 900099 | 106,684 | 106,684 | | |
| rvic | | | | | | | | | | |
| × × | d | | | | | | | | | |
| grar | e | | | | | | | | | |
| ě | | | | | | | | | | |
| | f | All other program | serv | rice revenue. | | | | | | |
| | _ | Total. Add lines 2 | | | | 18,036,305 | 1 | | | |
| | | Investment income similar amounts) . | • | iuaing aiviae | nas, II | nterest, and other | 2,277,035 | | -1,256 | 2,278,291 |
| | | Income from invest | | | • | • | | | | |
| | 5 | Royalties | ı. | (i) Rea | | (ii) Personal | · | | | |
| | | | | (I) Kea | | (II) Fersorial | - | | | |
| | | Gross rents | 6a | | 15,155 | | _ | | | |
| | b | Less: rental expenses | 6b | | | | | | | |
| | С | Rental income or (loss) | 6c | | 15,155 | | | | | |
| | c | Net rental income | | | | | 15,155 | | | 15,155 |
| | | | | (i) Securi | ies | (ii) Other | | | | |
| | 7a Gross amount from sales of 7a 21,608,295 | | N8 293 | 387,512 | | | | | | |
| | | assets other than inventory | r ==,, | | 357,7525 | | | | | |
| | b | Less: cost or | 76 | 10.6 | 40.046 | | | | | |
| | other basis and sales expenses 7b 19,649,946 | | 49,940 | | | | | | | |
| | С | Gain or (loss) | 7c | 1,9 | 58,347 | 387,512 | 2 | | | |
| | c | Net gain or (loss) | - | | | | 2,345,859 | | | 2,345,859 |
| ø | 8a | Gross income from fu (not including \$ | | ising events ,876,259 of | | | | | | |
| eun | | contributions reporte See Part IV, line 18 | d on | line 1c). | | | | | | |
| 3e√ | | | | | 8a 8b | 28,581 | _ | | | |
| Other Revenue | | Less: direct expen Net income or (los | | | | <u> </u> | | | | -28,581 |
| | | • | , | | Ī | | | | | |
| | 9a | Gross income from See Part IV, line 19 | | | 9a | | | | | |
| | Ŀ | Less: direct expen | ises | | 9b | | _ | | | |
| | • | Net income or (los | ss) fr | om gaming a | ctiviti | es > | | | | |
| | 10 | aGross sales of inve | antai | ny loce | | | | | | |
| | 10. | returns and allowa | | | 10a | | | | | |
| | Ŀ | Less: cost of good | ls sol | ld | 10 b | |] | | | |
| | • | Net income or (los | | | nvent | | | | | |
| | 11 | Miscellaneo aIOM Loan Collecti | | | | Business Code 900099 | 1,029,918 | 1,029,918 | | |
| | | TOTAL CORRECT | on f | | | | , ==,= 20 | , ==,=== | | |
| | l t | Immigration Proce | essin | na fees | | 900099 | 9 857,489 | 857,489 | | |
| | | | | ., | | | | | | |
| | | Miscellaneous Fee | !S | | ŀ | 900099 | 9 1,271,709 | 1,271,709 | | |
| | | | | | | | | | | |
| | c | All other revenue | • | | <u> </u> | | 360,717 | 360,717 | | |
| | • | Total. Add lines 1 | 1a-1 | 11d | | • | 3,519,833 | | | |
| | 12 | Total revenue. S | ee ir | nstructions . | | | 950,664,386 | 21,556,138 | -1,256 | 4,610,724 |
| | | | | | | | 230,004,380 | 21,550,150 | -1,230 | Form 990 (2020) |

| Form 990 (2020) | | | | Page 10 |
|--|------------------------|------------------------------|---|---------------------------------------|
| Part IX Statement of Functional Expenses | | | | |
| Section 501(c)(3) and 501(c)(4) organizations must c | | = | | mn (A). |
| Check if Schedule O contains a response or note to an | y line in this Part IX | | | 🗆 |
| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
| Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | 4,218,661 | 4,218,661 | | |
| 2 Grants and other assistance to domestic individuals. See Part IV, line 22 | 24,748,596 | 24,748,596 | | |
| 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16. | 325,992,532 | 325,992,532 | | |
| 4 Benefits paid to or for members | 0 | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 3,284,493 | 1,023,094 | 1,794,334 | 467,065 |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 Other salaries and wages | 341,623,230 | 288,512,694 | 36,788,521 | 16,322,015 |
| 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) | 12,434,463 | 8,712,754 | 2,424,643 | 1,297,066 |
| 9 Other employee benefits | 41,918,410 | 35,625,594 | 4,441,301 | 1,851,515 |
| 10 Payroll taxes | 9,085,799 | 6,372,764 | 1,833,888 | 879,147 |
| 11 Fees for services (non-employees): | | | | |
| a Management | 0 | | | |
| b Legal | 3,188,688 | 734,422 | 2,437,704 | 16,562 |
| c Accounting | 1,623,038 | 560,264 | 1,037,269 | 25,505 |
| d Lobbying | 0 | | | · · · · · · · · · · · · · · · · · · · |
| e Professional fundraising services. See Part IV, line 17 | 2,979,705 | | | 2,979,705 |
| f Investment management fees | 0 | | | |
| g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) | 21,117,400 | 13,482,047 | 5,430,831 | 2,204,522 |
| 12 Advertising and promotion | 15,715,339 | 759,278 | 207,994 | 14,748,067 |
| 13 Office expenses | 21,969,153 | 17,521,534 | 845,525 | 3,602,094 |
| 14 Information technology | 12,684,286 | 8,859,449 | 3,394,340 | 430,497 |
| 15 Royalties | 0 | , , | | · · · |
| 16 Occupancy | 25,652,602 | 25,410,296 | 149,905 | 92,401 |
| 17 Travel | 31,907,138 | 31,747,766 | 129,585 | 29,787 |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | 027,, 00 | 227,000 | |
| 19 Conferences, conventions, and meetings | 1,474,876 | 1,212,840 | 127,127 | 134,909 |
| 20 Interest | 320,200 | | 222,044 | 98,156 |
| 21 Payments to affiliates | 0 | | • | , |
| 22 Depreciation, depletion, and amortization | 687,590 | 630,632 | 38,292 | 18,666 |
| 23 Insurance | 2,749,511 | 2,650,582 | 63,502 | 35,427 |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | -1, | | | , |
| a Recruitment | 653,611 | 657,765 | -73,839 | 69,685 |
| b Dues and Registration | 267,388 | 217,385 | 29,426 | 20,577 |
| c Subscriptions | 765,034 | 390,688 | 225,807 | 148,539 |
| d | | | | |
| a All other expenses | -2 914 702 | -3 019 495 | 60 668 | 44 125 |

904,147,041

Total functional expenses. Add lines 1 through 24e
 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).

797,022,142

61,608,867

45,516,032

Form 990 (2020)

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33

Liabilities 22

Fund Balances

ō 29

Assets 30 6

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12 13

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6.956

16.761.923

5,519,099

2,546,755

85,897,254

38.690.509

4,821,055

418,242,328

62,836,697

104.332.065

476.230

118.060

8,115,088

175.878.140

94.821.245

147,542,943

242,364,188

418,242,328

186,538,178

4.615

19.553.065

6,091,560

12,226,046

118,914,572

27.440.697

9,962,417

527,551,484

66,435,303

135.393.762

969.935

1,401,655

19,044,039

223.244.694

103,620,251

200,686,539

304,306,790

527,551,484

Form 990 (2020)

Page **11**

| Check if Schedule O contains a response or note to any line in this Part IX . | |
|---|---|
| | T |
| | |

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Investments—publicly traded securities .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Investments—other securities. See Part IV, line 11 .

Investments—program-related. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 33) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

| | (A) Beginning of year | | (B End of |
|---------------------------|---------------------------------|---|--------------|
| Cash-non-interest-bearing | 156,945,242 | 1 | |
| | 47.040.044 | | |

| 2 | Savings and temporary cash investments | 17,316,914 | 2 | 201,833 |
|---|--|------------|---|-------------|
| 3 | Pledges and grants receivable, net | 89,736,621 | 3 | 146,618,501 |
| 4 | Accounts receivable, net | | 4 | |
| 5 | Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons | | 5 | |
| _ | | | | |

14,281,956

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net Assets Inventories for sale or use Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other 10a 26.508,002 basis. Complete Part VI of Schedule D

10b

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

☐ Both consolidated and separate basis

2b

2c

3a

3b

Yes

Yes

Yes

Yes Form 990 (2020)

consolidated basis, or both: Consolidated basis ☐ Separate basis ☐ Both consolidated and separate basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

Separate basis

Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

Additional Data

Software ID: 20011406

EIN: 13-5660870

Software Version: 20.0.2.0

Name: INTERNATIONAL RESCUE COMMITTEE INC.

Form 990 (2020)

Form 990, Part III, Line 4a:

In Africa, the IRC worked in 20 countries to respond to new and ongoing crises in the region. In East Africa, including Ethiopia, Kenya, Somalia, Sudan, South Sudan, Uganda, Yemen, and Zimbabwe, the IRC provided lifesaving aid in response to conflict and during periods of severe drought, and strengthened health, water, and sanitation systems throughout the region. In North and West Africa, including Burkina Faso, Cameroon, Chad, Cote D Ivoire, Liberia, Libya, Mali, Niger, Nigeria, and Sierra Leone, the IRC strengthened health systems and additionally implemented programs to protect vulnerable populations, particularly women and children. The IRC in the Great Lakes region, in Burundi, Central African Republic, the DR Congo, and Tanzania, worked with local and national partners to help rebuild communities impacted by violence, and put in place rapid response mechanisms to provide lifesaving support to those in need.

In the Middle East, the IRC worked in Iraq, Jordan, Lebanon, and Syria. Through local partnerships, the IRC delivered aid inside Syria, and additionally supported Syrian refugees in Lebanon and Jordan. The IRC also delivered programs in the Kurdish Region of Iraq and aided Iraqi refugees through the region. The IRC, along with the Sesame Workshop, implemented a large-scale childhood development intervention aimed at improving early reading, math, and social-emotional skills of children. It is the largest

Form 990, Part III, Line 4b:

early childhood intervention in the history of humanitarian response.

Form 990, Part III, Line 4c:

Through a network of 26 cities across the country, the IRCs US Programs USP Department ensures that refugees and other vulnerable immigrants have the resources and tools they need to build new lives in America. USP serves 45,000 individuals each year through a diverse portfolio of programs aimed at five core outcomes Health, Safety, Economic Wellbeing. Education, and Power, Staff and volunteers work together to resettle newly arrived refugees. facilitating food, shelter, and other basic needs during the

pivotal first months in the US. To promote self-reliance over the long term, the IRC also offers English language classes, vocational training, and job placement activities, as well as specialized services for asylees, survivors of torture, human trafficking, and other forms of trauma. The IRC provides comprehensive legal services to help refugees

and other immigrants become permanent residents and US citizens, and supports a variety of programs designed to help new arrivals feel welcome and integrate into their adopted communities.

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless amount of other hours per compensation compensation week (list person is both an officer compensation from the from related any hours and a director/trustee) from the

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48,503

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54,784

54,619

32,471

32,804

organization and

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | MISC) | MISC) | related organizations |
|--|--|-----------------------------------|-----------------------|---------|--------------|---------------------------------|--------|-----------|-------|--------------------------|
| David Miliband Dir/CEO/Pres | 38.00 | Х | | х | | | | 1,007,343 | 0 | 55,212 |
| Madlin J Sheerman Senior Vice President, Operations Strategy | 38.00 | | | | х | | | 389,696 | 0 | 51,907 |
| Oscar Raposo CFO, SVP Finance, Treasurer | 38.00 | | | х | | | | 377,367 | 0 | 54,758 |
| Jennifer Sime SVP US Programs | 38.00 | | | | х | | | 348,279 | 0 | 42,638 |
| Ricardo Castro | 38.00 | | | | | | | | | |

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| Jennifer Sime |
|----------------------------|
| SVP US Programs |
| Ricardo Castro |
| General Counsel, Secretary |

Madeleine Fackler

Brian Johnson

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Chief HR Officer

Ciaran Donnelly

Susan Ringler

Ourania Dionysiou

Chief Information Officer

SVP International Programs

Chief Ethics and Compliance Officer

Vice President, IPP and GPPS

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and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

| | any hours | and | l a dir | recto | • | ustee) |) | organization | organizations | from the |
|--|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Kelly Moody Vice President, USA Philanthropy | 38.00 | | | | | х | | 262,445 | 0 | 38,569 |
| Amanda Seller until 04012020 Senior Vice President, Revenue | 38.00 | | | | | | х | 190,509 | 0 | 10,917 |
| Clifford S Asness | 1.00 | X | | | | | | 0 | 0 | 0 |

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| Senior Vice President, Revenue | |
|--------------------------------|---|
| Clifford S Asness | |
| Director | |
| George Biddle | |
| Director | L |
| | ľ |

Susan Dentzer

Timothy F Geithner

Co-Chair, Board of Directors

John Holmes until 12042020

Maria Hummer -Tuttle

Director

Director

Director

Director

Director

Steven Klinsky

David A Levine

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless amount of other hours per compensation compensation person is both an officer from related week (list from the compensation

| | any hours | and | a dir | recto | or/tr | ustee) |) | organization | organizations | from the |
|---|---|-----------------------------------|-----------------------|-------|--------------|---------------------|--------|----------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | 1 () | Key employee | Highest compensated | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Francois-Xavier De Mallmann Director | 1.00 | Х | | | | | | 0 | 0 | 0 |
| Eduardo G Mestre Director | 1.00 | х | | | | | | 0 | 0 | 0 |
| Tillian Muller | 1.00 | | | | | | | | | |

| Eduardo G Mestre | 1.00 | X | | | 0 | |
|------------------|--------|----|--|--|---|--|
| Director | | Α. | | | | |
| Jillian Muller | 1.00 | | | | | |
| Director | •••••• | Х | | | 0 | |
| Thomas Nides | 1.00 | X | | | 0 | |
| Director | | ^ | | | ٥ | |

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and Independent Contractors

Michael J O Neill

Dr Kathleen M Pike PhD

Pamela Saunders-Albin

Anjali Pant MD MPH until 03042021

Director

Director

Director

Director

Director

Gillian Sorensen

Omar Saeed

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) organizations

| | any hours | | | | | ustee) | | organization | organizations | from the |
|---|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|----------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Sally Susman Co-Chair, Board of Directors | 1.00 | х | | | | | | 0 | 0 | 0 |
| Mona K Sutphen Director | 1.00 | х | | | | | | 0 | 0 | 0 |
| Tony Tamer Director | 1.00 | х | | | | | | 0 | 0 | 0 |
| Dr Merryl H Tisch | 1.00 | Х | | | | | | 0 | 0 | 0 |

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| Tony Tamer | |
| Director | |
| Dr Merryl H Tisch | |
| Director | |
| E Eric Tokat | ſ |

Director

Director

Advisor

Director

Director

Director

Udi Grofman

Becca Heller

P Maureen White

Zeid Ra ad Al Hussein

Cheryl Cohen Effron

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours from the

organization

organizations

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

| 4 | I 6 | | | | | | | J (W 2/4000 ! | /M/ 3/1000 | I amagination and ' |
|--|---|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|------------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officer | Key employee | Highest compensated employee | Former | - (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Andrew Klaber Director | 1.00 | X | | | | | | 0 | 0 | 0 |
| Joshua L Steiner Director | 1.00 | X | | | | | | 0 | 0 | 0 |
| Leah Joy Zell Director | 1.00 | X | | | | | | 0 | 0 | 0 |
| Tracy R Wolstencroft Co-Chair, Board of Directors | 1.00 | X | | | | | | o | 0 | 0 |
| Masood Ahmed from December 2020 | 1.00 | | | | | | | | | |

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Dr Titilola Banioko from November 2

Matthew M Johnson from December 202

Director

Director

Director

Director

Director

Prakash Melwani

Laurence D Fink

Uzodinma Iweala MD

and Independent Contractors

and Independent Contractors (A) (B) (D) (E) (F) Name and Title Reportable Average Position (do not check more Reportable Estimated than one box, unless compensation compensation amount of other hours per week (list person is both an officer from the from related compensation

| | any hours | | | | | ustee) | | organization | organizations | from the |
|------------------|---|-----------------------------------|-----------------------|-----|--------------|------------------------------|--------|----------------------|----------------------|--|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | 101 | Key employee | Highest compensated employee | Former | (W- 2/1099- MISC) | (W- 2/1099- MISC) | organization and related organizations |
| Janet Napolitano | 1.00 | X | | | | | | 0 | 0 | 0 |
| Director | | | | | | | | Ĭ | · · | |

1.00

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Kathrin Junge-Hlsing

Director

| efil | e GR/ | APHIC pri | nt - DO NOT PRO | CESS | As Filed Data - | | | DLN: 9 | 3493222020152 |
|------|---------|------------------------------|---|-----------------------------|--|---|-------------------------------------|---|---|
| SCI | HED | ULE A | D | hlic (| harity Statu | e and Dul | olic Supp | ort | OMB No. 1545-0047 |
| | m 99 | | Complete i | f the or | ganization is a sect 4947(a)(1) nonexe ▶ Attach to Form 9 | ion 501(c)(3) e mpt charitable 990 or Form 99 | organization or trust. 00-EZ. | · a section | 2020 |
| | | f the Treasury | ► Go to <u>w</u> | <u>ww.irs.</u> | <i>gov/Form</i> 990 for i | nstructions and | I the latest info | ormation. | Open to Public Inspection |
| Nam | e of th | he organiza | tion DMMITTEE INC | | | | | Employer identific | ation number |
| | | | | | | | | 13-5660870 | |
| | rt I | | | | s (All organization it is: (For lines 1 thro | | | See instructions. | |
| 1 | n garnz | | • | | sociation of churches | • | | (A)(i) | |
| 2 | | , | | , | .)(A)(ii). (Attach Sch | | | (~)(1)1 | |
| 3 | | | | | ice organization desc | , | , , | . | |
| 4 | | · | | | - | | | - | ntor the beenitely |
| • | Ш | name, city, | | operate | a in conjunction with | a nospital descri | iped in section . | 170(b)(1)(A)(iii). E | nter the nospital s |
| 5 | | | ation operated for the (iv). (Complete Part | | of a college or unive | rsity owned or op | perated by a gov | ernmental unit descri | bed in section 170 |
| 6 | | A federal, s | tate, or local govern | ment or | governmental unit de | scribed in sectio | on 170(b)(1)(A | ı)(v). | |
| 7 | ✓ | | ation that normally re (0(b)(1)(A)(vi). (C | | | s support from a | governmental u | nit or from the gener | al public described in |
| 8 | | | | | 170(b)(1)(A)(vi). | (Complete Part I | I.) | | |
| 9 | | | | | scribed in 170(b)(1) e instructions. Enter | | | with a land-grant coll college or university: | ege or university or a |
| 10 | | from activit | ies related to its exe | mpt fund ed busine | tions—subject to ceress taxable income (le | tain exceptions, | and (2) no more | is, membership fees, than 331/3% of its su ses acquired by the c | ipport from gross |
| 11 | | An organiza | ation organized and o | perated | exclusively to test fo | r public safety. S | ee section 509 | (a)(4). | |
| 12 | | more public | ly supported organiz | ations d | | 09(a)(1) or se | ction 509(a)(2 | s of, or to carry out th). See section 509(a s 12e, 12f, and 12g. | |
| a | | Type I. A so | supporting organizati | on opera Jularly aj | ted, supervised, or c | ontrolled by its s | upported organiz | zation(s), typically by of the supporting orga | |
| b | | Type II. A manageme | supporting organizat | ion supe organiza | tion vested in the sar | | | organization(s), by ha ge the supported orga | _ |
| С | | Type III f | unctionally integra | ted. A si | | | | nd functionally integra | ted with, its |
| d | | Type III n | on-functionally int integrated. The orga | egrated anization | . A supporting organi | zation operated fy a distribution | in connection wi | th its supported orgar an attentiveness req | |
| e | | Check this | box if the organization | n receiv | | ation from the I | | pe I, Type II, Type II | I functionally |
| f | Enter | | of supported organiz | | · · · · · · · · · · | - | | | |
| g | Provi | de the follow | ing information abou | t the sup | oported organization(| s). | | | |
| | (i) N | Name of supp organization | | EIN | (iii) Type of organization (described on lines 1- 10 above (see instructions)) | | anization listed ing document? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) |
| | | | | | | Yes | No | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Tota | | | tion Act Notice, see | | | Cat. No. 11285 | | Schedule A (Form 9 | |

| P | art II Support Schedule for | | | | | | |
|-----|--|---------------------------------------|---|--|---|-----------------------------|-----------------|
| | (Complete only if you c | | | | | | ınder Part III. |
| _ | If the organization faile ection A. Public Support | d to qualify unde | er the tests liste | d below, please | complete Part II | 1.) | |
| | Calendar year | | | | | | |
| | (or fiscal year beginning in) ▶ | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") | 710,339,839 | 711,075,998 | 764,828,594 | 785,978,272 | 924,498,780 | 3,896,721,483 |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| _ | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | 710,339,839 | 711,075,998 | 764,828,594 | 785,978,272 | 924,498,780 | 3,896,721,483 |
| | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). | | | | | | |
| | Public support. Subtract line 5 | | | | | | 3,896,721,483 |
| | from line 4. | | | | | | 3,030,721,403 |
| | ection B. Total Support Calendar year | Г | T | | I | T | |
| | (or fiscal year beginning in) ► | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 7 | Amounts from line 4 | 710,339,839 | 711,075,998 | 764,828,594 | 785,978,272 | 924,498,780 | 3,896,721,483 |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 2,456,256 | 2,739,422 | 3,623,361 | 2,209,306 | 2,292,190 | 13,320,535 |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 | Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). | 4,335,003 | 3,796,154 | | | | 8,131,157 |
| 11 | Total support. Add lines 7 through 10 | | , | | | | 3,918,173,175 |
| | Gross receipts from related activities, | | | | | 12 | 70,451,918 |
| 13 | First 5 years. If the Form 990 is for | the organization's | first, second, third | d, fourth, or fifth ta | ix year as a section | n 501(c)(3 <u>)</u> organiz | ation, check |
| | this box and stop here | | | | | ▶□ | |
| | ection C. Computation of Publ | | | | | | |
| | Public support percentage for 2020 (I | | | | | 14 | 99.450 % |
| 15 | Public support percentage for 2019 S | chedule A, Part II, | line 14 | | | 15 | 99.340 % |
| 16a | 33 1/3% support test—2020. If th | | | | | | |
| b | and stop here. The organization qua 33 1/3% support test—2019. If t | | | | | | |
| 17a | box and stop here. The organization qualifies as a publicly supported organization | | | | | | |
| b | organization | est—2019. If the dization meets the " | organization did no 'facts-and-circums | et check a box on li stances" test, check | ne 13, 16a, 16b, o c this box and sto j | or 17a, and line p here. | ▶□ |
| 18 | supported organization | tion did not check a | a box on line 13, 1 | .6a, 16b, 17a, or 1 | 7b, check this box | and see | <u></u> |
| | instructions | | | | | | ▶□ |

| Р | Support Schedule for | | | | | | |
|-----|---|------------------------|---------------------|---------------------|--------------------|------------------|--|
| | (Complete only if you c | | | | | | er Part II. If |
| | the organization fails to | quality under | the tests listed | pelow, please co | omplete Part II. |) | |
| Se | ection A. Public Support | | | | | | 1 |
| | Calendar year | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| | (or fiscal year beginning in) ► Gifts, grants, contributions, and | | | | | | |
| - | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") . | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | |
| | merchandise sold or services | | | | | | |
| | performed, or facilities furnished in | | | | | | |
| | any activity that is related to the organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are | | | | | | |
| • | not an unrelated trade or business | | | | | | |
| | under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid | | | | | | |
| 5 | to or expended on its behalf The value of services or facilities | | | | | | |
| 3 | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 6 | Total. Add lines 1 through 5 | | | | | | |
| 7a | Amounts included on lines 1, 2, and | | | | | | |
| | 3 received from disqualified persons | | | | | | |
| b | Amounts included on lines 2 and 3 received from other than disqualified | | | | | | |
| | persons that exceed the greater of | | | | | | |
| | \$5,000 or 1% of the amount on line | | | | | | |
| | 13 for the year. | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c | | | | | | |
| | from line 6.) | | | | | | |
| | ection B. Total Support | | 1 | 1 | Γ | Π | 1 |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2016 | (b) 2017 | (c) 2018 | (d) 2019 | (e) 2020 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, | | | | | | |
| | dividends, payments received on | I | | | | | |
| | securities loans, rents, royalties and | I | | | | | |
| | income from similar sources. | | | | | | |
| b | Unrelated business taxable income | I | | | | | |
| | (less section 511 taxes) from businesses acquired after June 30, | I | | | | | |
| | 1975. | I | | | | | |
| С | Add lines 10a and 10b. | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included in line 10b, | I | | | | | |
| | whether or not the business is | I | | | | | |
| 12 | regularly carried on. | | - | | | | 1 |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | 1 | | | | | |
| | (Explain in Part VI.) | 1 | | | | | |
| 13 | | | | | | | |
| | 11, and 12.). | | <u> </u> | 1.6 11 601 1 | | F04()(2) | <u> </u> |
| 14 | First 5 years. If the Form 990 is for the | - | | | • | . , , , | · — |
| | check this box and stop here | | | | | <u></u> | <u> ▶ ⊔ </u> |
| | ection C. Computation of Public S | | | 1 (6) | | | |
| 15 | Public support percentage for 2020 (lin | | | | | 15 | |
| 16 | Public support percentage from 2019 S | | | | | 16 | |
| | ection D. Computation of Investi | | | | ., | | |
| 17 | Investment income percentage for 202 | • | ., | | • • | 17 | |
| 18 | Investment income percentage from 2 | 019 Schedule A, | Part III, line 17 . | | | 18 | |
| 19a | 331/3% support tests—2020. If the | organization did r | not check the box | on line 14, and lin | ne 15 is more thar | 33 1/3%, and lin | e 17 is not |
| | more than 33 1/3%, check this box and s | stop here. The o | rganization qualifi | es as a publicly su | ipported organiza | tion | . ▶□ |
| | 33 1/3% support tests—2019. If the | | | | | | |
| | not more than 33 1/3%, check this box | and stop here. | The organization | qualifies as a publ | icly supported org | anization | . ▶ □ |
| 20 | Private foundation. If the organization | on did not check a | a box on line 14, 1 | l9a, or 19b, check | this box and see | instructions | ▶ 🗆 |

Page 4

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9b

9c

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10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

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box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, | | | |
|----|---|--|--|--|
| | describe the designation. If historic and continuing relationship, explain. | | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described | | | |
| | in section 509(a)(1) or (2). | | | |
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. | | | |
| | | | | |
| b | Did the organization confirm that each supported organization qualified under section $501(c)(4)$, (5) , or (6) and satisfied the public support tests under section $509(a)(2)$? If "Yes," describe in Part VI when and how the organization made the | | | |
| | determination. | | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | | |

| | III Section 303(a)(1) or (2). | 2 | | | |
|----|--|---|--|--|--|
| 3a | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below. | | | | |
| | Sc Delow. | | | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the | | | | |
| | determination. | | | | |
| C | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | | | |
| | If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | | | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | | | | |
| | | | | | |
| | | | | | |

| | the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the | | | | | |
|----|---|----|--|--|--|--|
| | determination. | | | | | |
| С | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | | | | | |
| | If Tes, explain in Part VI what controls the organization put in place to ensure such use. | | | | | |
| 4a | any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | | | | |
| | checked box 12a or 12b in Part I, answer lines 4b and 4c below. | | | | | |
| b | the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported | | | | | |
| | organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | | | | |
| С | id the organization support any foreign supported organization that does not have an IRS determination under sections 01(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | | | | |
| | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | | | | | |
| 5а | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the | | | | | |

| C | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? | | | | | |
|----|---|--|--|--|--|--|
| | If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | | | | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you | | | | | |
| | checked box 12a or 12b in Part I, answer lines 4b and 4c below. | | | | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or | | | | | |
| | supervised by or in connection with its supported organizations. | | | | | |
| С | Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | | | | |
| | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes. | | | | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the | | | | | |
| | organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document). | | | | | |
| | | | | | | |

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b 5с Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below.

| Pa | rt IV | Supporting Organizations (continued) | | | | |
|----|--|--|--------|---------|-----|--|
| | | | | Yes | No | |
| | | e organization accepted a gift or contribution from any of the following persons? | | | | |
| а | | on who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the hing body of a supported organization? | 11a | | | |
| b | A fami | ily member of a person described in 11a above? | 11b | | | |
| | | o controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part | 11c | | | |
| _ | VI. | B. Type I Supporting Organizations | | | | |
| | ection | b. Type I Supporting Organizations | | Yes | No | |
| 1 | appoir descrit activit remov | e officers, directors, trustees, or membership of one or more supported organizations have the power to regularly be or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," be in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's ies. If the organization had more than one supported organization, describe how the powers to appoint and/or be directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year. | 1 | | | |
| 2 | Did the | e organization operate for the benefit of any supported organization other than the supported organization(s) that | _ | | | |
| | operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization. | | | | | |
| _ | | | | | | |
| 5 | ection | C. Type II Supporting Organizations | | Yes | No | |
| 1 | Were: | a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of | | 163 | 110 | |
| - | each d | of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the rting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | | |
| S | ection | D. All Type III Supporting Organizations | | | | |
| | | | | Yes | No | |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing | | | | | |
| | documents in effect on the date of notification, to the extent not previously provided? | | | | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | | | | | |
| _ | | | | | | |
| 3 | voice i | ison of the relationship described in line 2 above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at all times the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | | |
| S | ection | E. Type III Functionally-Integrated Supporting Organizations | | | | |
| 1 | | the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi | ons): | | | |
| | a 🗌 | The organization satisfied the Activities Test. Complete line 2 below. | | | | |
| | b 🗆 | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | | |
| | c 🗌 | The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see | instru | ctions) | | |
| 2 | Activit | ies Test. Answer lines 2a and 2b below. | | Yes | No | |
| | suppor o rgan respor | bstantially all of the organization's activities during the tax year directly further the exempt purposes of the rted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported lizations and explain how these activities directly furthered their exempt purposes, how the organization was sive to those supported organizations, and how the organization determined that these activities constituted | 2- | | | |
| | | entially all of its activities. e activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the | 2a | | | |
| | organi <i>organi</i> | zation's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the zation's position that its supported organization(s) would have engaged in these activities but for the organization's ement. | 2b | | | |
| 3 | | of Supported Organizations. Answer lines 3a and 3b below. | 20 | | | |
| | a Did the | e organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of pported organizations? If "Yes" or "No" provide details in Part VI . | 3a | | | |
| | | e organization exercise a substantial degree of direction over the policies, programs and activities of each of its red organizations? <i>If "Yes," describe in Part VI. the role played by the organization in this regard.</i> | 3b | | | |
| | | | 30 | | | |

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors

(explain in detail in Part VI): 2

Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).

Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 7 Recoveries of prior-year distributions

8

Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

Income tax imposed in prior year

instructions)

temporary reduction (see instructions)

5

7

Enter greater of line 2 or line 3 4

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

1 2 3

3

4

5

6

7

8

4

5

6

Schedule A (Form 990 or 990-F7) 2020

Current Year

| _1 | Amounts paid to supported organizations to accomplish exempt purposes | 1 | |
|----|--|---|--|
| 2 | Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity | 2 | |
| 3 | Administrative expenses paid to accomplish exempt purposes of supported organizations | 3 | |
| 4 | Amounts paid to acquire exempt-use assets | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) | 5 | |
| 6 | Other distributions (describe in Part VI). See instructions | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | 7 | |
| 8 | Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions | 8 | |
| 9 | Distributable amount for 2020 from Section C, line 6 | 9 | |
| | | | |

| 7 Total annual distributions. Add lines 1 through 6. | 7 | | | |
|---|-----------------------------|--------------------------------------|-----|---|
| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions | | | | |
| 9 Distributable amount for 2020 from Section C, line 6 | | | | |
| 10 Line 8 amount divided by Line 9 amount | | | 10 | |
| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributio Pre-2020 | ons | (iii) Distributable Amount for 2020 |
| 1 Distributable amount for 2020 from Section C, line 6 | | | | |
| 2 Underdistributions if any for years prior to 2020 | | | | |

| 8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions | | | | 8 | |
|---|-----------------------|-----------------------------|--------------------------------------|-----|---|
| 9 Distributable amount for 2020 fr | rom Section C, line 6 | | | 9 | |
| 10 Line 8 amount divided by Line 9 | amount | | | 10 | |
| Section E - Distribution (see instruction | | (i) Excess Distributions | (ii) Underdistributio Pre-2020 | ons | (iii) Distributable Amount for 2020 |
| 1 Distributable amount for 2020 from | om Section C, line 6 | | | | |
| 2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions. | | | | | |
| 3 Excess distributions carryover, if | any, to 2020: | | | | |
| a From 2015 | | | · | | |
| b From 2016 | | | | | |

| (see instructions) | Excess Distributions | Underdistributions Pre-2020 | Distributable Amount for 2020 |
|---|----------------------|--------------------------------|----------------------------------|
| 1 Distributable amount for 2020 from Section C, line 6 | | | |
| 2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions. | | | |
| 3 Excess distributions carryover, if any, to 2020: | | | |
| a From 2015 | | | |
| b From 2016 | | | |
| c From 2017 | | | |
| d From 2018 | | | |
| e From 2019 | | | |
| f Total of lines 3a through e | | | |
| g Applied to underdistributions of prior years | | | |
| h Applied to 2020 distributable amount | | | |
| i Carryover from 2015 not applied (see | | | |

| See instructions. | | |
|--|--|--|
| 3 Excess distributions carryover, if any, to 2020: | | |
| a From 2015 | | |
| b From 2016 | | |
| c From 2017 | | |
| d From 2018 | | |
| e From 2019 | | |
| f Total of lines 3a through e | | |
| g Applied to underdistributions of prior years | | |
| h Applied to 2020 distributable amount | | |
| Carryover from 2015 not applied (see instructions) | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | |
| 4 Distributions for 2020 from Section D, line 7: | | |
| \$ | | |
| Applied to underdistributions of prior years | | |
| b Applied to 2020 distributable amount | | |

| f Total of lines 3a through e | | |
|--|--|--|
| g Applied to underdistributions of prior years | | |
| h Applied to 2020 distributable amount | | |
| Carryover from 2015 not applied (see instructions) | | |
| j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. | | |
| 4 Distributions for 2020 from Section D, line 7: | | |
| \$ | | |
| a Applied to underdistributions of prior years | | |
| b Applied to 2020 distributable amount | | |
| c Remainder. Subtract lines 4a and 4b from line 4. | | |
| 5 Remaining underdistributions for years prior to | | |

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. **b** Excess from 2017. c Excess from 2018.

e Excess from 2020.

3j and 4c. 8 Breakdown of line 7:

| Schedule A (| Form 990 or 990-EZ) 2 | 2020 Page 8 | | | | | | |
|--------------|---|---|--|--|--|--|--|--|
| Part VI | Section A, lines 1, 2, Part IV, Section D, lin | mation. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; es 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See | | | | | | |
| | | Facts And Circumstances Test | | | | | | |
| Collection | Fees related to the loar | ount shown as other income relates to the following 3 components also noted on Part VIII, Line 11. IOM Loan as given to refugees to cover the cost of their resettlement in the US, whereby the resettling agency collects the est the 75 is returned to IOM for issuing future loans. | | | | | | |
| 990 Sched | dule A, Supplemen | tal Information | | | | | | |
| Ret | Return Reference Explanation | | | | | | | |
| Part II Sect | ion B Line 10 Cont .2 | Immigration processing fees related to the filing paperwork for green card and other immig ration paperwork whereby the refugees cover the fee. Miscellaneous revenue relates to vari ous rebates received, point redemptions on credit cards, miscellaneous credits and other n | | | | | | |

on-program revenues received during the year.

Section 527 organizations: Complete Part I-A only.

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

Political Campaign and Lobbying Activities

• Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public

OMB No. 1545-0047

DLN: 93493222020152

Department of the Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

EZ)

SCHEDULE C (Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

| ● S ● S If the Prox | Section 501(c)(3) organizations that Section 501(c)(3) organizations that | | ection 501(h)): Co ider section 501(h | mplete Part II-A. Do not co)): Complete Part II-B. Do i | mplete Part II-B. not complete Part II-A. |
|------------------------------|--|--|--|--|--|
| | ne of the organization | adone. Complete Fait III. | | Employer iden | tification number |
| INTE | ERNATIONAL RESCUE COMMITTEE INC | | | 12 5660070 | |
| Dari | t I-A Complete if the organ | nization is exempt under sectio | n 501(c) or is | 13-5660870 | zation |
| | | | | | |
| 1 | "political campaign activities") | ization's direct and indirect political can | | ` | |
| 2 | | itures (see instructions) | | | \$ |
| 3 | <u> </u> | aign activities (see instructions) | | | |
| Pari | - | nization is exempt under sectio | | | |
| 1 | | x incurred by the organization under se | | | \$ |
| 2 | • | x incurred by organization managers u | | | \$ |
| 3 | - | ion 4955 tax, did it file Form 4720 for t | • | | ☐ Yes ☐ No |
| 4a | Was a correction made? | | | | 🗌 Yes 🔲 No |
| b | If "Yes," describe in Part IV. | | | | |
| Par | t I-C Complete if the organ | nization is exempt under sectio | n 501(c), exce | ept section 501(c)(3) | • |
| 1 | Enter the amount directly expende | ed by the filing organization for section | 527 exempt funct | ion activities 🕨 | \$ |
| 2 | | anization's funds contributed to other o | | ection 527 exempt | \$ |
| 3 | Total exempt function expenditure | es. Add lines 1 and 2. Enter here and or | Form 1120-POL, | line 17b▶ | \$ |
| 4 | Did the filing organization file For | m 1120-POL for this year? | ••••• | | ☐ Yes ☐ No |
| 5 | organization made payments. For of political contributions received | employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly deliver see (PAC). If additional space is needed, | ount paid from the ed to a separate p | filing organization's funds olitical organization, such a | . Also enter the amount |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0 |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| For Pa | aperwork Reduction Act Notice, see t | the instructions for Form 990 or 990-EZ. | Cat. | No. 50084S Schedule C (| Form 990 or 990-EZ) 2020 |

| Sch | nedule C (Form 990 or 990-EZ) 2020 | | | | | | Pa | age 2 |
|-----------|--|------------------------------------|---|--|--------------------|--|--------------------------|--------------|
| P | art II-A Complete if the organization is section 501(h)). | s exemp | ot under secti | on 501(c)(3) | and filed | Form 5768 (el | ection under | |
| A | Check if the filing organization belongs to a expenses, and share of excess lobby | | | t in Part IV each a | affiliated gro | up member's nam | e, address, EIN, | |
| В | Check ▶ ☐ if the filing organization checked box | x A and "l | imited control" p | rovisions apply. | | | | |
| | Limits on Lobbyi (The term "expenditures" mea | | | ırred.) | | (a) Filing organization's totals | (b) Affiliated of totals | group |
| | Total lobbying expenditures to influence public opi | nion (gra: | ss roots lobbying |) | | | | |
| b | Total lobbying expenditures to influence a legislati | ve body (| direct lobbying) . | · | | | | |
| C | Total lobbying expenditures (add lines 1a and 1b) | | | | | | | |
| d | Other exempt purpose expenditures | | | | | | | |
| е | Total exempt purpose expenditures (add lines 1c a | and 1d) | | | | | | |
| f | columns. | | | | | | | |
| | If the amount on line 1e, column (a) or (b) is | s: The lo | bbying nontax | able amount is: | | | | |
| | Not over \$500,000 | 20% of | the amount on line | 1e. | | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,00 | 00 plus 15% of the | excess over \$500,00 | 0. | | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,0 | 00 plus 10% of the | excess over \$1,000, | 000. | | | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,00 | 00 plus 5% of the ex | xcess over \$1,500,0 | 00. | | | |
| | Over \$17,000,000 | \$1,000 | ,000. | | | | | |
| j | Subtract line 1f from line 1c. If zero or less, enter If there is an amount other than zero on either line section 4911 tax for this year? | e 1h or lir Averagi a sectio | ne 1i, did the organic ng Period Und nn 501(h) elec | anization file Forn der Section 50 ction do not he | 01(h) ave to co | mplete all of th | Yes N | lo |
| | Lohhvina Ex | penditu | ıres Durina 4- | ·Year Averagi | na Period | | | |
| | Calendar year (or fiscal year | penaite | (a) 2017 | (b) 2018 | (c) 201 | .9 (d) 2020 | (e) Tota | |
| | beginning in) | | (a) 2017 | (B) 2010 | (0) 201 | (u) 2020 | (e) 100 | <u></u> |
| <u>2a</u> | Lobbying nontaxable amount | | | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | | | |
| С | Total lobbying expenditures | | | | | | | |
| d | Grassroots nontaxable amount | | | | | | | |
| е — | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | | | |
| f | Grassroots lobbying expenditures | | | | | | | |

| For e | | on under section 501(h)). ugh 1i below, provide in Part IV a detailed description of the lobbying | (| a) | | (b) | |
|-----------|---|---|---------|-----------|------|---------|-------|
| activity. | | agn 11 below, provide in variety a detailed description of the lobbying | Yes | No | 4 | Amour | ıt |
| 1 | | anization attempt to influence foreign, national, state or local legislation, public opinion on a legislative matter or referendum, through the use of: | | | | | |
| а | Volunteers? | | | No | | | |
| b | Paid staff or management (include | e compensation in expenses reported on lines 1c through 1i)? | Yes | | 1 | | |
| c | Media advertisements? | | | No | 1 | | |
| d | Mailings to members, legislators, o | or the public? | | No | | | |
| е | Publications, or published or broad | dcast statements? | | No | | | |
| f | Grants to other organizations for le | obbying purposes? | | No | | | |
| g | Direct contact with legislators, the | ir staffs, government officials, or a legislative body? | Yes | | | 16 | 58,15 |
| h | Rallies, demonstrations, seminars, | , conventions, speeches, lectures, or any similar means? | | No | | | |
| i | Other activities? | | | No | | | |
| j | Total. Add lines 1c through 1i | | | | | 16 | 58,15 |
| 2a | Did the activities in line 1 cause th | ne organization to be not described in section 501(c)(3)? | | No | | | |
| b | If "Yes," enter the amount of any | tax incurred under section 4912 | | | | | |
| C | If "Yes," enter the amount of any | tax incurred by organization managers under section 4912 | | | | | |
| d | | a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| | t III-A Complete if the org 501(c)(6). | ganization is exempt under section 501(c)(4), section 501(c) | | | | Yes | No |
| 1 | Were substantially all (90% or mo | re) dues received nondeductible by members? | | | 1 | | |
| 2 | Did the organization make only in- | -house lobbying expenditures of \$2,000 or less? | | | 2 | | |
| 3 | Did the organization agree to carry | y over lobbying and political expenditures from the prior year? | | | 3 | | |
| | and if either (a) BC answered "Yes." | ganization is exempt under section 501(c)(4), section 501(c) OTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part | III-A | | | 501(c |)(6 |
| 1 | • | nounts from members | 1 | | | | |
| 2 | expenses for which the section | | 2a | | | | |
| a b | | | 2b | | | | |
| c | , , | | 2c | | | | |
| 3 | | tion 6033(e)(1)(A) notices of nondeductible section 162(e) dues . | 3 | | | | |
| 4 | | int on line 2c exceeds the amount on line 3, what portion of the excess does | | | | | |
| • | the organization agree to carryove | er to the reasonable estimate of nondeductible lobbying and political | 4 | | | | |
| 5 | Taxable amount of lobbying and p | olitical expenditures (see instructions) | 5 | | | | |
| P | art IV Supplemental Info | rmation | | | | | |
| | | art I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); , complete this part for any additional information. | Part II | -A, lines | 1 an | d 2 (se | :e |
| | Return Reference | Explanation | | | | | |
| II-B | | IRC tracks any time spent on lobbying by our Advocacy team in DC and mem contact legislators or other officials. Time spent by staff was tracked on the s | | | | | |

and the topics of discussion in those meetings.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

DLN: 93493222020152

OMB No. 1545-0047

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990,

Internal Revenue Service

(Form 990)

1

2

5

6

3

5

6

8

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Open to Public ► Attach to Form 990. Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization **Employer identification number** INTERNATIONAL RESCUE COMMITTEE INC 13-5660870 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Year 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

following amounts relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 52283D Schedule D (Form 990) 2020

| Pai | 1111 | Organizations Maintaining Co | llections of Art | t, Histori | cal Tı | easur | es, or | Other : | Similar As | sets (con | tinued) | |
|------------|---------|---|-----------------------------------|----------------|-----------|-----------------|-----------|-----------|---------------|----------------|---|-----------|
| 3 | | ng the organization's acquisition, accessions (check all that apply): | on, and other recor | ds, check | any of | the follo | owing th | at are a | significant u | se of its co | llection | |
| а | | Public exhibition | | d | | Loan o | r exchar | nge prog | rams | | | |
| b | | Scholarly research | | е | | Other . | | | | | | |
| С | | Preservation for future generations | | | | | | | | | | |
| 4 | | vide a description of the organization's co t XIII. | llections and expla | ain how the | ey furth | ner the o | organiza | tion's ex | empt purpo | se in | | |
| 5 | | ing the year, did the organization solicit o ets to be sold to raise funds rather than t | | | | | | | | ☐ Yes | | ١o |
| Pa | rt IV | | | | | | | | | | | |
| | | Complete if the organization ans X, line 21. | | | | | | | | nt on For | n 990, | Part |
| 1a | | he organization an agent, trustee, custod uded on Form 990, Part X? | | | | | | | | ☐ Yes | ✓ r | lo |
| | T.C. II | Van II anni la te tha anni anni anni an Bank VII | · | - 6 -11 | to let ex | | Г | | Α. | mount | | _ |
| b | | Yes," explain the arrangement in Part XII | • | _ | | | - | 1c | A | mount | | _ |
| c d | _ | Jinning balance | | | | | | 1d | | | | _ |
| | | litions during the year | | | | | · - | 1e | | | | _ |
| e f | | tributions during the year | | | | | | 1f | | | | _ |
| • | | ling balance | | | | | _ | | | | | _ |
| 2a | | the organization include an amount on F | | | | | | | | | ⊔ г | lo |
| b | | Yes," explain the arrangement in Part XII | I. Check here if the | e explanati | ion has | been p | rovided | in Part X | III | ✓ | | |
| Pa | art V | | L 175 C 11 | | | T) (): | 4.0 | | | | | |
| | | Complete if the organization ans | wered "Yes" on I (a) Current year | | rior yea | | | ars hack | (d) Three yea | rs hack (e) | Four yea | ars hack |
| 1a | Begi | nning of year balance | 112,649,0 | | 114,144 | | | ,947,000 | | 068,000 | | ,977,000 |
| | _ | ributions | | | | , | | ,, | • | 501,000 | | 59,000 |
| | | nvestment earnings, gains, and losses | 24,865,0 | 00 | 3,704 | ,000 | 3 | ,253,000 | 8,3 | 278,000 | 10 | ,030,000 |
| | | ts or scholarships | | | | | | | | | | |
| | | r expenditures for facilities | | | | | | | | | | |
| Ū | | programs | 5,298,0 | 00 | 5,199 | ,000 | 5 | ,056,000 | 5,0 | 000,000 | 4 | ,998,000 |
| f | Adm | inistrative expenses | | | | | | | | | | |
| g | End | of year balance | 132,216,0 | 00 | 112,649 | ,000 | 114 | ,144,000 | 115, | 947,000 | 112 | ,068,000 |
| 2 | Pro | vide the estimated percentage of the curr | ent year end balar | nce (line 1 | g, colu | mn (a)) | held as | : | | | | · |
| а | Boa | rd designated or quasi-endowment ► | 44.000 % | | | | | | | | | |
| b | Per | manent endowment ► 42.000 % | | | | | | | | | | |
| С | Ter | m endowment ► 14.000 % | | | | | | | | | | |
| | The | percentages on lines 2a, 2b, and 2c show | uld equal 100%. | | | | | | | | | |
| 3а | | there endowment funds not in the posse | ssion of the organi | ization tha | t are h | eld and | adminis | tered for | the | | | |
| | _ | anization by: | | | | | | | | 25/1 | Yes | No |
| | | Unrelated organizations | | | • | • • | | | | 3a(i) 3a(ii | | No No |
| b | | Related organizations Yes" on 3a(ii), are the related organizatio | | | dule R | · · · | | | | 3b | ' | 110 |
| 4 | | scribe in Part XIII the intended uses of the | • | | | - | - | • | | | | |
| Pa | rt VI | Land, Buildings, and Equipme | nt. | | | | | | | | | |
| | | Complete if the organization ans | | | | | | | | rt X, line | 10. | |
| | Des | cription of property (a) Cost or ot (investm | | ost or other | basis (d | other) | (c) Accur | mulated d | epreciation | (d) | Book valı | ie |
| 1 a | Land | | | | | | | | | | | |
| b | Build | ings | | | | | | | | | | |
| | | ehold improvements | | | 17,66 | 57,742 | | | 7,507,663 | | 1 | 0,160,079 |
| | | oment | | | 4,06 | 50,700 | | | 2,500,676 | | | 1,560,024 |

4,779,560

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) .

505,943

12,226,046

4,273,617

| Part VII | Investments—Other Securities. Complete if the organization answered "Yes" on F | Form 990. Part IV. line | e 11h.See Form 990. F | Part X. line 12. |
|--------------------------|---|----------------------------|-----------------------------|------------------------------------|
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Metho | d of valuation: -year market value |
| L) Financia | derivatives | | Cost of end-of | -year market value |
| 2) Closely-l 3) Other | neld equity interests | | | |
| () Financial | derivatives and other financial products | | | |
| 3) Closely-h | eld equity interests | | | |
| C) Limited F | Partnership | 21,315,697 | | F |
| D) Direct Le | nding Fund | 6,125,000 | | F |
| E) | | | | |
| F) | | | | |
| G) | | | | |
| ٦) | | | | _ |
| :) | | | | |
| otal. (Columi | n (b) must equal Form 990, Part X, col. (B) line 12.) | 27,440,697 | | |
| art VIII | Investments—Program Related. Complete if the organization answered 'Yes' on F | Form 990 Part IV line | e 11c See Form 990 | Part X line 13 |
| | (a) Description of investment | 330, Fare IV, III. | (b) Book value | (c) Method of valuation: |
| | | | | Cost or end-of-year market value |
| L) | | | | |
| 2) | | | | |
| 3) | | | | |
| 4) | | | | |
| 5) | | | | |
| 5) | | | | |
| 7) | | | | |
| 8) | | | | |
| | | | | |
| 9) | | | | |
| 10) | | | | |
| otal. (Columi Part IX | Other Assets. | | <u>▶</u> | |
| | Complete if the organization answered 'Yes' on Formal (a) Description | | e 11d. See Form 990, Par | t X, line 15. (b) Book value |
| 1) | (a) Description | | | (b) Book value |
| 2) | | | | |
| 3) | | | | |
| 4) | | | | |
| | | | | |
| 5) | | | | |
| 6) | | | | |
| 7) | | | | |
| 8) | | | | |
| 9) | | | | |
| 10) | | | | |
| | mn (b) must equal Form 990, Part X, col.(B) line 15.) | | | • |
| Part X | Other Liabilities. Complete if the organization answered 'Yes' on Fe | orm 990, Part IV, line | <u>11e o</u> r 11f.See Form | 990, Part X, line 25. |
| | (a) Description of li | | | (b) Book value |
| | ncome taxes | | | |
| | ncome taxes g Loan Program Liability | | | 536,384 |
| • | iability Related to Split Interest Agreement | | | 6,563,714 |
| 5) Deferred | rent | | | 11,943,941 |
| 5) | | | | |
| 6) | | | | |
| 7) | | | | |
| 8) | | | | |
| 9) | | | | |
| | n (b) must equal Form 990, Part X, col.(B) line 25.) | | | 19,044,039 |
| Liability fo | or uncertain tax positions. In Part XIII, provide the text o | of the footnote to the org | anization's financial state | ments that reports the organizati |

2

C

d

е 3

b

Part XIII

See Additional Data Table

4

5

Schedule D (Form 990) 2020

Page 4

50,489,842

950,692,967

-28,581

950,664,386

936,221,441

32,184,400

904,037,041

110,000

904.147.041

Schedule D (Form 990) 2020

d

Recoveries of prior year grants e 3

Other (Describe in Part XIII.)

Subtract line **2e** from line **1** Amounts included on Form 990, Part VIII, line 12, but not on line 1:

4 Add lines **4a** and **4b**

b

C 5 Part XII

Donated services and use of facilities . . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

1

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Investment expenses not included on Form 990, Part VIII, line 7b .

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

4a 4b

2a

2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

-28,581

288,717

31,895,683

110,000

23,101,559

27.099.566

288.717

4c

2e

3

4c

5

2e

3

| chedule D (Form 990) 2020 | Page 5 |
|-------------------------------|--------------------|
| Part XIII Supplemental Inform | nation (continued) |
| Return Reference | Explanation |
| | |
| | |
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Schedule D (Form 990) 2020

Additional Data

Software ID: 20011406 Software Version: 20.0.2.0

EIN: 13-5660870

Name: INTERNATIONAL RESCUE COMMITTEE INC.

Supplemental Information

| Explanation | |
|-------------|--|
|-------------|--|

Return Reference IV 2b Custodial accounts at IRC represent funds held on behalf of refugee participants related t o economic empowerment programs Assets for Financial Independence AFI and Individual Devel opment Accounts IDA in compliance with program requirements as stipulated by the donors. F

unds will be released as refugees complete the program requirements

| Supplemental Information | |
|--------------------------|---|
| Return Reference | Explanation |
| V 5 | IRC board of directors has established a fund to provide for the long-term financial stabi lity of IRC and to enhance its ability to respond to extraordinary emergency needs. The purpose of this fund is to provide a mechanism for the board of directors to set aside and invest certain funds. Accordingly, the board of directors has designated the Leo Cherne Emergency Fund, certain unrestricted bequests, extraordinary gifts as determined by the board of directors, and portions of unrestricted surpluses in operating funds for this purpose. IRC permanently restricted donor endowment and emergency funds further support the long term financial stability of the organization. Included in this category are endowment specific donations and emergency funds that allow IRC to use principal on a temporary basis for emergency response situations and to preposition itself with commonly used emergency response inventory. Principal used by IRC must be subsequently returned to the fund. IRC maint ains a spending rate policy on the endowment invested assets. The spending rate policy was designed to preserve the value of the investment portfolio in real terms and to reduce the impact of market fluctuations on operations. The spending rate used for operations is set at 4.5 of the previous three-year rolling fair value average. |

Cupplemental Information

| Supplemental Information | ıpplemental Information | | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|--|--|
| Return Reference | Explanation | | | | | | | | |
| X 2 | The Internal Revenue Service has ruled that, pursuant to Section 501c3 of the Internal Revenue Code the Code, IRC is exempt from federal income taxes and is a publicly supported or ganization, as defined in Section 509a1 of the Code. As a not for profit organization, IRC is also exempt from state and local income taxes. Accordingly, IRC is not subject to income taxes except to the extent it has taxable income from activities that are not related to its exempt purposes. IRC utilizes a threshold of more likely than not for recognition and derecognition of tax positions taken or expected to be taken in a tax return. No provisi on for income taxes was required for fiscal year 2021 or 2020. | | | | | | | | |

Supplemental Information Return Reference Explanation The amount includes subsidiary revenue amounting 27,597,274 included in audited financial XI 2d statement and change in value of splitting interest amounting 497,708.

| upplemental Information | |
|-------------------------|--|
| Return Reference | Explanation |
| 〈I 4b | The amount 28,581 represent special event expenses |

Supplemental Information Return Reference Explanation The amount includes subsidiary expense amounting 31,867,102 included in audited consolidat XII 2d ed financial statement and special event expenses amounting 28,581

| upplemental Information | |
|-------------------------|--|
| Return Reference | Explanation |
| (I 1 | The financial statement revenue includes both operating revenue and non-operating amounts. |

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| upplemental Information | |
|-------------------------|--|
| Return Reference | Explanation |
| XII 1 | The financial statement revenue includes both operating revenue and non-operating amounts. |

| SCHEDULE F (Form 990) | State | ement of A | Activities (| Outside the Un | ited States | OMB No. 1545-0047 |
|--|------------------------------------|-----------------------|---|--|---|--------------------------------------|
| Department of the Treasury | • | _ | ation answered " ► Attach to nov/Form990 for i | line 14b, 15, or 16. nformation. | 2020 Open to Public Inspection | |
| Internal Revenue Service | | | | | | |
| Name of the organization INTERNATIONAL RESCUE | | NC | | | Employer ide | ntification number |
| | | | | | 13-5660870 | |
| | nformation Part IV, line | | Outside the l | Jnited States. Comple | ete if the organization | answered "Yes" on |
| 1 For grantmakers | s. Does the or | ganization mail | ntain records to | substantiate the amoun | t of its grants and | |
| other assistance, | the grantees' | eligibility for th | e grants or assi | stance, and the selection | n criteria used | |
| to award the gran | ts or assistan | ce? | | | | ☑ Yes 🗌 No |
| 2 For grantmakers outside the United | | Part V the orga | inization's proce | dures for monitoring the | e use of its grants and o | ther assistance |
| 3 Activites per Region | n. (The followir | ng Part I, line 3 t | able can be dupli | cated if additional space i | s needed.) | |
| (a) Region | | (b) Number of | (c) Number of | (d) Activities conducted in | (e) If activity listed in (d) is | a (f) Total expenditures |
| (a) kegidil | | offices in the region | employees, agents, and independent contractors in the region | fundraising, program services, investments, grants to recipients located in the | program service, describe specific type of service(s) in the region | for and investments in the region |
| See Add'l Data | | | and independent contractors in the | fundraising, program services, investments, grants | specific type of | for and investments |
| | | | and independent contractors in the | fundraising, program services, investments, grants to recipients located in the | specific type of | for and investments |
| | | | and independent contractors in the | fundraising, program services, investments, grants to recipients located in the | specific type of | for and investments |
| | | | and independent contractors in the | fundraising, program services, investments, grants to recipients located in the | specific type of | for and investments |
| | | | and independent contractors in the | fundraising, program services, investments, grants to recipients located in the | specific type of | for and investments |
| See Add'l Data | | region | and independent contractors in the region | fundraising, program services, investments, grants to recipients located in the region) | specific type of | for and investments in the region |
| | ion sheets to | | and independent contractors in the region | fundraising, program services, investments, grants to recipients located in the region) | specific type of | for and investments |

and FIN (if

Part II

(book, EMV.

Page 2

Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (q) Amount (h) Description (i) Method of organization section cash grant of noncash of noncash valuation grant cash

| | applicable) | | dispursement | assistance | assistance | appraisal, other) |
|----------------|-------------|--|--------------|------------|------------|-------------------|
| See Add'l Data | | | | | | |
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assistance

disbursement

assistance

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

420 23

Schedule F (Form 990) 2020

| Schedule F (Form 990) 2020 | | | | | | | Page 3 |
|---------------------------------|---------------------|--------------------------|-----------------------------|------------------------------------|--|---|--|
| Part IIII Grants and Oth | | | | ed States. Complete i | f the organization ar | swered "Yes" on Form | 990, Part IV, line 16. |
| Part III can be d | luplicated if addit | | reeded. | 1 | | | |
| (a) Type of grant or assistance | (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of noncash assistance | (g) Description of noncash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
| See Add'l Data | | | | | | | |
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| Sche | dule F (Form 990) 2020 | | Page 4 |
|------|---|--------------|---------------|
| Pai | rt IV Foreign Forms | | |
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | ✓ Yes | □No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | | _ |
| | | ☐ Yes | ✓ No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471) | | |
| | | ✓ Yes | □No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621). | ☐Yes | ✓ No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865) | | |
| | | Yes | ✓ No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form | | |
| l | 5713; don't file with Form 990) | ✓ Yes | □ No |

| Schedule F (F | orm 990) 2020 Page 5 |
|---------------------|---|
| Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. |
| 990 Sched | ule F, Supplemental Information |
| Return Reference | Explanation |
| Part I Line 1 | IRC maintains records of all grants made from the pre-award / due diligence phase which determines the selection of the subgrantee, the signing of the grant agreement and throughout the activity with the submission of periodic financial and programmatic reports as required per the grant agreement. |

990 Schedule F, Supplemental Information

Doturn

| Reference | Explanation |
|----------------|--|
| Part II Line 2 | IRC has detailed required procedures for monitoring the use of funds outside of the US which vary based on the type of award granted, the dollar size of the award and the organization US, Local NGO, Community Based Organization CBO Local Government, etc. the funds have been granted to. All |
| | reports are reviewed, on-site periodic review visits occur routinely, and capacity building is performed as required. |

Explanation

990 Schedule F, Supplemental Information

| Return Reference | Explanation |
|---------------------------|--|
| Part III Line Column C | The International Rescue Committee responds to the worlds worst humanitarian crises and helps people whose lives and livelihoods are shattered by conflict and disaster to survive, recover and gain control of their future. In 2021 in more than 40 countries and in 27 U.S. cities, our dedicated teams provide clean water, shelter, healthcare, education and empowerment support to refugees and displaced people. In 2021 the IRC and our partners reached over 31.5 million people in countries affected by crisis. As part of this work, IRC Supported 3,607 health facilities, provided 6,085,969 outpatient consultations, Treated 155,528 children under 5 for severe acute malnutrition, admitted 429,256 people for nutrition services, built or rehabilitated water supplies serving 2,700,629 people, reached 1,243,527 people with cash assistance, reached 1,240,379 people through gender-based violence awareness raising activities, provided specialized support to 33,426 women survivors of violence, supported 98,128 children in IRC safe spaces and other protection programs and enrolled 370,771 children and youth in learning programs. In the United States IRC served nearly 35,000 people across 27 cities with asylum and protection programs and assisted 2,697 people to become new U.S. citizens |

Additional Data

Europe Including Iceland and

Greenland

Software ID: 20011406 **Software Version:** 20.0.2.0

EIN: 13-5660870

Name: INTERNATIONAL RESCUE COMMITTEE INC

225,129

Form 990 Schedule F Part I - Activities Outside The United States

| (a) Region | (b) Number of offices in the region | (c) Number of employees or agents in region | (d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for region |
|---|-------------------------------------|--|--|--|--------------------------------------|
| Europe Including Iceland and Greenland | 2 | 39 | Program Services | | 668,560 |

Grants to recipients

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of region agents in service(s) in region region services, grants to recipients located in the reaion) Central America and the 351 Program Services 9,511,706 Caribbean Central America and the Grants to recipients 9,620,673 Caribbean

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Middle East and North Africa 2.000 Program Services 92,881,307 Middle East and North Africa Grants to recipients 55,737,770

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Sub-Saharan Africa 7.085 Program Services 148,625,302 20 Sub-Saharan Africa Grants to recipients 185,484,121

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) East Asia and the Pacific 1,238 Program Services 23,327,415 East Asia and the Pacific Grants to recipients 29,899,768

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) South Asia 1,369 Program Services 18,664,001 South Asia Grants to recipients 20,344,087

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of I (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Economic 10,383,036 Bank Transfer lFM∨ the Pacific Wellbeina lEast Asia and lEconomic 75,518 Bank Transfer IFMV

the Pacific

Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Economic 56.274 Bank Transfer IFMV Ithe Pacific Wellbeina

East Asia and Health 1.547.248 Bank Transfer lFM∨

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 933,242 Bank Transfer lFM∨ the Pacific

759,179 Bank Transfer

East Asia and

Ithe Pacific

Health

IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 564,723 Bank Transfer lFM∨ the Pacific

385.822 Bank Transfer

IFMV

East Asia and

Ithe Pacific

Health

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 160,242 Bank Transfer lFM∨ the Pacific

46.514 Bank Transfer IFMV

East Asia and Health Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Health 44,297 Bank Transfer lFM∨ the Pacific

42,526 Bank Transfer IFMV

East Asia and Health

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) I CANA

| | the Pacific | Health | 39,915 | Bank Transfer | | FMV |
|--|---------------|--------|--------|---------------|--|-----|
| | East Asia and | Health | 32,370 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) 20 607 | Dank Transfer LEMAN /

| l | the Pacific | nealtri | 30,667 | Dank Transfer | | FIM V |
|---|---------------|---------|--------|---------------|--|-------|
| | East Asia and | Health | 25,239 | Bank Transfer | | IFMV |

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Health 18,412 Bank Transfer lFM∨ the Pacific

the Pacific

East Asia and Health

18,412 Bank Transfer

FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 5,400 Bank Transfer lfMV the Pacific

253,481 Bank Transfer

IFMV

East Asia and

Ithe Pacific

Health

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 231,418 Bank Transfer lfMV the Pacific

48.484 Bank Transfer

IFMV

East Asia and

Ithe Pacific

Health

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Health 38,355 Bank Transfer lFM∨ the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

East Asia and Health 27,279 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Health 14,175 Bank Transfer lFM∨ the Pacific

1.087.681 Bank Transfer

lFM∨

East Asia and

the Pacific

IPower

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and 7,292 Bank Transfer lFM∨ **IPower**

the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

East Asia and 5,872 Bank Transfer IFMV **IPower**

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Safety 954,235 Bank Transfer lFM∨ the Pacific

541.474 Bank Transfer

East Asia and

Ithe Pacific

Safety

IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Safety 296,197 Bank Transfer lfMV the Pacific

96,464 Bank Transfer

IFMV

East Asia and

Ithe Pacific

Safety

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 83,749 Bank Transfer lFM∨ the Pacific

60,200 Bank Transfer

IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Safety

East Asia and

Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 58,383 Bank Transfer lFM∨

the Pacific East Asia and Safety

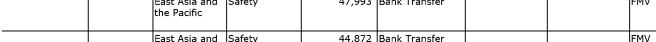
Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

49,904 Bank Transfer

IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 47,993 Bank Transfer lFM∨



East Asia and Safety

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 43,760 Bank Transfer lFM∨ the Pacific

37,258 Bank Transfer

East Asia and

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Safety

IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 34,531 Bank Transfer lFM∨ the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

East Asia and Safety 32,173 Bank Transfer IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 30,624 Bank Transfer lFM∨ the Pacific

IFMV

East Asia and Safety 30,031 Bank Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 29,049 Bank Transfer lFM∨

the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

East Asia and Safety 28,910 Bank Transfer IFMV Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 26,487 Bank Transfer lFM∨ the Pacific

East Asia and

Ithe Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Safety

22,766 Bank Transfer

IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 20,919 Bank Transfer lFM∨

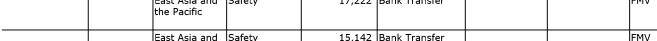
the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

East Asia and Safety 19,357 Bank Transfer IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 17,222 Bank Transfer lFM∨



Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal. applicable) assistance other) East Asia and Safety 13,868 Bank Transfer lFM∨

the Pacific

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

East Asia and Safety 11,222 Bank Transfer IFMV

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, and EIN(if cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) East Asia and Safety 9,497 Bank Transfer lFM∨

East Asia and the Pacific 9,497 Bank Transfer FMV

East Asia and Safety 9,342 Bank Transfer FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Ithe Pacific

(i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(if organization cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Safety 110.105 Bank Transfer IFMV Europe Includina Iceland and Greenland

28.532 Bank Transfer

IFMV



Europe

Includina Iceland and Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Safety

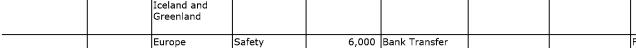
(i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Safety 24,934 Bank Transfer FMV Europe Includina

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Iceland and Greenland

| | Iceland and Greenland | | | | | |
|--|--------------------------|--------|--------|---------------|--|-----|
| | Europe Including | Safety | 23,906 | Bank Transfer | | FMV |

(i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Safety 8,000 Bank Transfer IFMV Europe lIncludina Iceland and



Form 990 Schedule F Part II - Grants or Entities Outside The United States

Greenland

IFMV Includina Iceland and

(i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

96,705 Bank Transfer

lFM∨

| | South America | Economic | 11,517 | Bank Transfer | | FMV |
|--|---------------|-----------|--------|---------------|---|-----|
| | | Wellbeing | | | | |
| | l | | | | l | 1 |

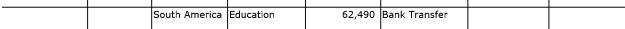
Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America | Education

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of l (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

23,516 Bank Transfer

lFM∨



South America Education

IFMV

(i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, accietance

91,909 Bank Transfer

FMV

| applicable) | | | | | assistance | other) |
|-------------|---------------|--------|---------|---------------|------------|--------|
| | South America | Health | 120,000 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

|South America |Health

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, accietance ther)

30,080 Bank Transfer

FMV

| applicable) | | | | | assistante | oth |
|-----------------|---------------|--------|--------|---------------|------------|-----|
| | South America | Health | 38,529 | Bank Transfer | | FMV |

|South America |Health

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, accietance

20,456 Bank Transfer

FMV

| арріісавіе) | | | | | assistance | other) |
|-------------|---------------|--------|--------|---------------|------------|--------|
| | South America | Health | 25,540 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America |Health

(i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) MΥ

17,282 Bank Transfer

FMV

| | South America | Health | 19,055 | Bank Transfer | | FM |
|--|---------------|--------|--------|---------------|--|----|

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America Health

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, assistance

6,424 Bank Transfer

FMV

| аррпсавісу | | | | | assistance | other) |
|------------|---------------|--------|-------|---------------|------------|--------|
| | South America | Health | 9,611 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America Health

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America Health 50,801 Bank Transfer IFMV

16,000 Bank Transfer

FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America Health

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

South America |Safety 11,000 Bank Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

IFMV |South America |Safety 11,000 Bank Transfer FMV

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other)

43,750 Bank Transfer

FMV

| , , | | | | | | |
|-----|---------------|--------|--------|---------------|--|----|
| | South America | Safety | 61,908 | Bank Transfer | | Fľ |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America | Safety

FMV

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

36,676 Bank Transfer

FMV



Form 990 Schedule F Part II - Grants or Entities Outside The United States

|South America |Safety

(i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

28,229 Bank Transfer

FMV

| | | | | | | İ |
|--|---------------|--------|--------|---------------|--|-----|
| | South America | Safety | 29,925 | Bank Transfer | | FΜ\ |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America | Safety

(i) Method of (h) Description l(b) IRS codel (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, assistance

25,329 Bank Transfer

FMV

| аррі | Jileabie) | | | | | assistance | other) |
|------|-----------|--------------|--------|--------|---------------|------------|--------|
| | Sc | outh America | Safety | 27,703 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America | Safety

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

16,018 Bank Transfer

FMV

South America Safety 24,860 Bank Transfer FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

|South America |Safety

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

FMV

South America |Safety 11,447 Bank Transfer IFMV

|South America |Safety 10,000 Bank Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

9,838 Bank Transfer

FMV

South America |Safety 10,000 Bank Transfer

Form 990 Schedule F Part II - Grants or Entities Outside The United States

|South America |Safety

IFMV

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

8,439 Bank Transfer

FMV

South America Safety 9,189 Bank Transfer FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

|South America |Safety

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other)

South America Safety 7,256 Bank Transfer FMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America Safety 7,256 Bank Transfer FMV

(i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other)

6,250 Bank Transfer

FMV

| , , | | | | | | |
|-----|---------------|--------|-------|---------------|---|-----|
| | South America | Safety | 6,353 | Bank Transfer | | FMV |
| | | | | | 1 | |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

South America | Safety

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South America Safety 5,000 Bank Transfer IFMV Middle East lEconomic 343,392 Bank Transfer IFMV land North Wellbeing Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Economic 267,406 Bank Transfer lFM∨ and North Wellbeina Africa Middle East 215.386 Bank Transfer lFM∨ lEconomic land North Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Economic 148,164 Bank Transfer lFM∨ and North Wellbeina Africa Middle East 113,295 Bank Transfer lFM∨ lEconomic land North Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East **IEconomic** 73,110 Bank Transfer FMV land North Wellbeina Africa Middle East 40.948 Bank Transfer FMV lEconomic land North | Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East 13,390 Bank Transfer ΙFΜV Economic and North Wellbeina Africa Middle East Education 225.296 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 198,820 Bank Transfer ΙFΜV and North Africa Middle East Education 194.852 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 165,244 Bank Transfer ΙFΜV and North Africa Middle East Education 159.684 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 159,187 Bank Transfer ΙFΜV and North Africa Middle East Education 151.850 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 151,844 Bank Transfer ΙFΜV and North Africa Middle East Education 126.664 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (e) Amount of (a) Name of section (d) Purpose of (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 126,435 Bank Transfer ΙFΜV and North Africa Middle East Education 84.996 Bank Transfer ΙFΜV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 75.034 Bank Transfer FMV land North Africa Middle East Education 74.071 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 72.930 Bank Transfer FMV land North Africa Middle East Education 72.060 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 71.552 Bank Transfer FMV land North Africa Middle East Education 64.836 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 48.284 Bank Transfer FMV land North Africa Middle East Education 46.796 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 46.588 Bank Transfer FMV land North Africa Middle East Education 44.383 Bank Transfer FMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 30.807 Bank Transfer FMV land North Africa Middle East Education 26.670 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 18.330 Bank Transfer FMV land North Africa Middle East Education 16.440 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Education 12.702 Bank Transfer FMV land North Africa Middle East Education 6.763 Bank Transfer FMV land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 2,381,164 Bank Transfer lFM∨ and North Africa Middle East Health 1,692,807 Bank Transfer ΙFΜV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 1,601,238 Bank Transfer lFM∨ and North Africa Middle East Health 994,135 Bank Transfer ΙFΜV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 818,976 Bank Transfer lfMV land North Africa Middle East Health 724.947 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 718,930 Bank Transfer lfMV land North Africa Middle East Health 711.145 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 620,609 Bank Transfer lfMV land North Africa Middle East Health 517.283 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 495,421 Bank Transfer lfMV land North Africa Middle East Health 488.103 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 443,784 Bank Transfer lfMV land North Africa Middle East Health 322,494 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 294,459 Bank Transfer lfMV land North Africa Middle East Health 253,203 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 250,476 Bank Transfer lfMV land North Africa Middle East Health 241.032 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 218,588 Bank Transfer lfMV land North Africa Middle East Health 189.964 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 151,836 Bank Transfer lfMV land North Africa Middle East Health 143.538 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 120,802 Bank Transfer lfMV land North Africa Middle East Health 106.748 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 91,243 Bank Transfer lFM∨ and North Africa Middle East Health 63.789 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 58,677 Bank Transfer lFM∨ and North Africa Middle East Health 52,882 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 44,487 Bank Transfer lFM∨ and North Africa Middle East Health 34,107 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Health 18,395 Bank Transfer lFM∨ and North Africa Middle East 12.730 Bank Transfer lFM∨ lPower land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East 136,378 Bank Transfer lfMV **IPower** land North Africa Middle East 18.238 Bank Transfer lfMV **IPower** land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 843,317 Bank Transfer lfMV land North Africa Middle East Safety 796,140 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 572,011 Bank Transfer lfMV land North Africa Middle East Safety 443.071 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 337,606 Bank Transfer lfMV land North Africa Middle East Safety 330.745 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 328,343 Bank Transfer lfMV land North Africa Middle East Safety 307.080 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 299,997 Bank Transfer lfMV land North Africa Middle East Safety 295.891 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 225,373 Bank Transfer lfMV land North Africa Middle East Safety 170.282 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 149,925 Bank Transfer lfMV land North Africa Middle East Safety 127.833 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 111,096 Bank Transfer lfMV land North Africa Middle East Safety 100.956 Bank Transfer lfMV land North Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 91,695 Bank Transfer lFM∨ land North Africa Middle East Safety 71,389 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 69,837 Bank Transfer lFM∨ land North Africa Middle East Safety 60.385 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 57,141 Bank Transfer lFM∨ and North Africa Middle East Safety 56,573 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 56,169 Bank Transfer lFM∨ land North Africa Middle East Safety 49.980 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 47,717 Bank Transfer lFM∨ and North Africa Middle East Safety 42.520 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 42,420 Bank Transfer lFM∨ land North Africa Middle East Safety 39,820 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 38,223 Bank Transfer lFM∨ land North Africa Middle East Safety 37.984 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 37,216 Bank Transfer lFM∨ land North Africa Middle East Safety 31,964 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 29,950 Bank Transfer lFM∨ land North Africa Middle East Safety 26.783 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 20,810 Bank Transfer lFM∨ land North Africa Middle East Safety 19,723 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) 19,512 Bank Transfer Middle East Safety lFM∨ land North Africa Middle East Safety 19.124 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 17,385 Bank Transfer lFM∨ land North Africa Middle East Safety 14,866 Bank Transfer lFM∨ land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Middle East Safety 11,474 Bank Transfer lFM∨ land North Africa Middle East Safety 7.486 Bank Transfer lFM∨

land North

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia 1.060.585 Bank Transfer lEconomic IFMV Wellbeina South Asia 214.359 Bank Transfer lFM∨ Economic

| Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) South Asia 71.988 Bank Transfer FMV lEconomic Wellbeina

South Asia 17.442 Bank Transfer lFM∨ lEconomic

Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (g) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, ther)

497,091 Bank Transfer

IFMV

| аррисавіе) | | | | | assistance | oth |
|------------|------------|-----------|-----------|---------------|------------|-----|
| | South Asia | Education | 1,234,682 | Bank Transfer | | FMV |

South Asia

lEducation

(i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other)

78,909 Bank Transfer

FMV

| , , | | | | | | 1 |
|-----|------------|-----------|---------|---------------|--|-----|
| | South Asia | Education | 111,270 | Bank Transfer | | FMV |
| | | | | | | i |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Education

South Asia

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal. applicable) assistance other)

1,099,986 Bank Transfer

IFMV

South Asia Education 13,071 Bank Transfer lFM∨

South Asia

Health

(i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other)

48,715 Bank Transfer

IFMV

South Asia Health 165,978 Bank Transfer lfMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Health

South Asia

(i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of i (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal. annlicable) assistance

80,645 Bank Transfer

lFM∨

| аррисавісу | | | | | assistance | other) |
|------------|------------|--------|--------|---------------|------------|--------|
| | South Asia | Safety | 91,265 | Bank Transfer | | FMV |

Form 990 Schedule F Part II - Grants or Entities Outside The United States

Safety

South Asia

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 579,225 Bank Transfer lEconomic IFMV Africa Wellbeina

Sub-Saharan 541,703 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 385,714 Bank Transfer lEconomic IFMV Africa Wellbeina Sub-Saharan 351,562 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 273,573 Bank Transfer lEconomic IFMV Africa Wellbeina

Sub-Saharan 255,969 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 173,160 Bank Transfer lEconomic IFMV Africa Wellbeina Sub-Saharan 132,212 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 123,432 Bank Transfer lEconomic IFMV Africa Wellbeina Sub-Saharan 108,056 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 100,687 Bank Transfer lEconomic IFMV Africa Wellbeina Sub-Saharan 85,946 Bank Transfer IFMV lEconomic

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 75.580 Bank Transfer lFM∨ Economic Africa Wellbeina Sub-Saharan 66.819 Bank Transfer IFMV lEconomic

|Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 64.947 Bank Transfer lFM∨ Economic Africa Wellbeina Sub-Saharan 58.455 Bank Transfer IFMV lEconomic

|Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 35.127 Bank Transfer lFM∨ Economic Africa Wellbeina

Sub-Saharan 33.533 Bank Transfer IFMV lEconomic

Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 23.293 Bank Transfer lFM∨ Economic Africa Wellbeina

21.694 Bank Transfer

IFMV

Sub-Saharan

lAfrica

Economic Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if grant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 17.115 Bank Transfer lFM∨ Economic Africa Wellbeina

16.483 Bank Transfer

IFMV

Sub-Saharan

lAfrica

Economic Wellbeina

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (f) Manner of (g) Amount of valuation ' (d) Purpose of l (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 14,631 Bank Transfer IFMV Economic Africa Wellbeina Sub-Saharan Education 2,758,386 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan lEducation 982,378 Bank Transfer IFMV Africa Sub-Saharan Education 937.606 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan lEducation 654,926 Bank Transfer IFMV Africa Sub-Saharan Education 503.031 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan lEducation 343,590 Bank Transfer IFMV Africa Sub-Saharan Education 214.220 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan lEducation 210,245 Bank Transfer IFMV Africa Sub-Saharan Education 133.533 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Education 49,817 Bank Transfer IFMV Africa Sub-Saharan Education 18.094 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of ((a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Education 16,276 Bank Transfer IFMV Africa Sub-Saharan Education 10.751 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 1,922,909 Bank Transfer IFMV Africa Sub-Saharan Health 1.808.057 Bank Transfer lFM∨ Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 1,744,680 Bank Transfer IFMV Africa Sub-Saharan Health 1,574,566 Bank Transfer lFM∨ Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (b) IRS code (h) Description (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 1,468,782 Bank Transfer IFMV Africa Sub-Saharan Health 1,250,321 Bank Transfer lFM∨ Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 1,227,807 Bank Transfer IFMV Africa Sub-Saharan Health 1.077.369 Bank Transfer lFM∨ Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 858,219 Bank Transfer FMV Africa Sub-Saharan Health 578,789 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 575,503 Bank Transfer FMV Africa Sub-Saharan Health 534,598 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 520,823 Bank Transfer FMV Africa

Sub-Saharan Health 498,493 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 478,207 Bank Transfer FMV Africa Sub-Saharan Health 453,888 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 440,000 Bank Transfer FMV Africa Sub-Saharan Health 397,522 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 389,587 Bank Transfer FMV Africa Sub-Saharan Health 384,232 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 362,587 Bank Transfer FMV Africa Sub-Saharan Health 353,862 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 352,699 Bank Transfer FMV Africa Sub-Saharan Health 345,812 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 337,552 Bank Transfer FMV Africa Sub-Saharan Health 322,799 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 272,311 Bank Transfer FMV Africa Sub-Saharan Health 269,810 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 256,345 Bank Transfer FMV Africa Sub-Saharan Health 254,525 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 249,799 Bank Transfer FMV Africa Sub-Saharan Health 234,223 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 228,451 Bank Transfer FMV Africa Sub-Saharan Health 226,818 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 226,069 Bank Transfer FMV Africa Sub-Saharan Health 218,068 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 189,089 Bank Transfer FMV Africa Sub-Saharan Health 187,382 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 180,348 Bank Transfer FMV Africa Sub-Saharan Health 178,095 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 174,260 Bank Transfer FMV Africa Sub-Saharan Health 172,118 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 172,088 Bank Transfer FMV Africa Sub-Saharan Health 167,497 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 165,887 Bank Transfer FMV Africa Sub-Saharan Health 151,259 Bank Transfer IFMV Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 150,000 Bank Transfer FMV Africa Sub-Saharan Health 147,195 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 138,934 Bank Transfer FMV Africa Sub-Saharan Health 136,016 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 132,667 Bank Transfer FMV Africa Sub-Saharan Health 121,704 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 116,037 Bank Transfer FMV Africa Sub-Saharan Health 111.787 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 107,593 Bank Transfer FMV Africa Sub-Saharan Health 105,444 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 101,156 Bank Transfer FMV Africa Sub-Saharan Health 100,224 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 96,019 Bank Transfer IFMV Africa Sub-Saharan Health 95.941 Bank Transfer lFM∨ lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 94,263 Bank Transfer IFMV Africa Sub-Saharan Health 83.076 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 71,789 Bank Transfer IFMV Africa Sub-Saharan Health 68.681 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 64,617 Bank Transfer IFMV Africa Sub-Saharan Health 61.326 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 57,615 Bank Transfer IFMV Africa Sub-Saharan Health 56.110 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 54,414 Bank Transfer IFMV Africa Sub-Saharan Health 54.398 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 54,081 Bank Transfer IFMV Africa Sub-Saharan Health 53.735 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 49,852 Bank Transfer IFMV Africa Sub-Saharan Health 45.990 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 45,011 Bank Transfer IFMV Africa Sub-Saharan Health 37.513 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 37,473 Bank Transfer IFMV Africa Sub-Saharan Health 34,600 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 29,789 Bank Transfer IFMV Africa Sub-Saharan Health 29.367 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 26,760 Bank Transfer IFMV Africa Sub-Saharan Health 25,435 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 25,346 Bank Transfer IFMV Africa Sub-Saharan Health 22,620 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 21,574 Bank Transfer IFMV Africa Sub-Saharan Health 20.828 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 20,562 Bank Transfer IFMV Africa Sub-Saharan Health 19.525 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 17,972 Bank Transfer IFMV Africa Sub-Saharan Health 16.142 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 14,395 Bank Transfer IFMV Africa Sub-Saharan Health 14.395 Bank Transfer lFM∨ lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 13,194 Bank Transfer IFMV Africa Sub-Saharan Health 10.479 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 10,479 Bank Transfer IFMV Africa Sub-Saharan Health 9.059 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 8,925 Bank Transfer IFMV Africa Sub-Saharan Health 7.445 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 7,188 Bank Transfer IFMV Africa Sub-Saharan Health 6.092 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 5,706 Bank Transfer FMV Africa Sub-Saharan Health 411,455 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 103,384 Bank Transfer lEconomic IFMV Africa Wellbeina Sub-Saharan Health 83,800 Bank Transfer IFMV lAfrica

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 77,042 Bank Transfer IFMV Africa Sub-Saharan Safety 65.056 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 47,539 Bank Transfer IFMV Africa Sub-Saharan Health 14.847 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Health 11,142 Bank Transfer IFMV Africa Sub-Saharan Health 10.000 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 2,327,954 Bank Transfer **I**Power IFMV Africa Sub-Saharan 943,288 Bank Transfer lFM∨ lPower Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISub-Saharan 241,011 Bank Transfer FMV **IPower** Africa Sub-Saharan 109,310 Bank Transfer IFMV lPower

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan 44,870 Bank Transfer **I**Power IFMV Africa Sub-Saharan 8.326 Bank Transfer lFM∨ lPower

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV, organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 1,625,750 Bank Transfer IFMV Africa Sub-Saharan Safety 1,372,005 Bank Transfer lFM∨ Africa

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 754,608 Bank Transfer FMV Africa Sub-Saharan Safety 547,154 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 491,459 Bank Transfer FMV Africa Sub-Saharan Safety 450,000 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 399,999 Bank Transfer FMV Africa Sub-Saharan Safety 368,494 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 329,280 Bank Transfer FMV Africa Sub-Saharan Safety 231,784 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 212,958 Bank Transfer FMV Africa

Sub-Saharan Safety 150,881 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 149,590 Bank Transfer FMV Africa Sub-Saharan Safety 139,764 Bank Transfer IFMV

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 86,842 Bank Transfer IFMV Africa Sub-Saharan Safety 83.423 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 83,007 Bank Transfer IFMV Africa Sub-Saharan Safety 73.618 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 67,638 Bank Transfer IFMV Africa

Sub-Saharan Safety 61.407 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 60,500 Bank Transfer IFMV Africa Sub-Saharan Safety 52.016 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 49,746 Bank Transfer IFMV Africa Sub-Saharan Safety 49.236 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 48,569 Bank Transfer IFMV Africa

Sub-Saharan Safety 42.819 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 42,197 Bank Transfer IFMV Africa Sub-Saharan Safety 40.090 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 39,972 Bank Transfer IFMV Africa Sub-Saharan Safety 39,650 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 33,556 Bank Transfer IFMV Africa Sub-Saharan Safety 32,496 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 29,984 Bank Transfer IFMV Africa Sub-Saharan Safety 29.727 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 28,228 Bank Transfer IFMV Africa Sub-Saharan Safety 26,691 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 24,828 Bank Transfer IFMV Africa Sub-Saharan Safety 23.796 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 23,528 Bank Transfer IFMV Africa Sub-Saharan Safety 23.004 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 21,830 Bank Transfer IFMV Africa Sub-Saharan Safety 20.475 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 18,474 Bank Transfer IFMV Africa Sub-Saharan Safety 17.338 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 14,730 Bank Transfer IFMV Africa Sub-Saharan Safety 13.819 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 13,079 Bank Transfer lFM∨ Africa Sub-Saharan Safety 12.967 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 12,856 Bank Transfer IFMV Africa Sub-Saharan Safety 12.516 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 11,963 Bank Transfer IFMV Africa Sub-Saharan Safety 11.751 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 11,593 Bank Transfer IFMV Africa Sub-Saharan Safety 11.078 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 10,000 Bank Transfer IFMV Africa Sub-Saharan Safety 9.646 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 9,446 Bank Transfer IFMV Africa Sub-Saharan Safety 8.978 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 8,922 Bank Transfer IFMV Africa Sub-Saharan Safety 8.142 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of I (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 7,201 Bank Transfer IFMV Africa Sub-Saharan Safety 7.201 Bank Transfer lFM∨

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of l(b) IRS code (h) Description (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant arant non-cash disbursement assistance appraisal, applicable) assistance other) Sub-Saharan Safety 5.299 Bank Transfer lFM∨ Africa IRC Affilate 1.492.808 Bank Transfer lFM∨ lEurope lIncludina

Iceland and

Greenland

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash organization and EIN(if arant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) IRC Affilate 5.528.936 Bank Transfer lFM∨ lEurope

Includina Iceland and

Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) CASH ASSISTANCE 2.147,692 East Asia and the Pacific 95.308 EDUCATION East Asia and MATERIALS the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) HEALTH CARE 2,434,439 East Asia and the Pacific OTHER ASSISTANCE | East Asia and 214.796 the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, assistance recipients assistance FMV, appraisal, other) PROGRAM SUPPLIES | East Asia and 3,508,046 11,979 PROGRAM IFMV MATERIAL ISUPPLIES the Pacific MATERIAL 107,295 SERVICE East Asia and CONTRACTS the Pacific

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (q) Description of (h) Method of assistance of cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 6,628 **EDUCATION** lEurope MATERIALS Includina Iceland and Greenland PROGRAM SUPPLIES 41,774 lEurope MATERIAL Including Iceland and Greenland

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or I (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SERVICE 16,121 Europe CONTRACTS Including Iceland and Greenland CASH ASSISTANCE 16,372,716 Middle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) EDUCATION 149,037 Middle East MATERIALS land North Africa HEALTH CARE 5,662,844 lMiddle East and North Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (g) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) OTHER ASSISTANCE 724,912 Middle East land North lAfrica 16,319,979 482.510 PROGRAM **I**FMV PROGRAM SUPPLIES Middle East MATERIAL SUPPLIES land North MATERIAL Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SERVICE CONTRACTS Middle East 642,589 and North Africa CASH ASSISTANCE 5,505,044 South America

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (h) Method of (a) Description of valuation (book, assistance cash grant disbursement non-cash non-cash recipients assistance assistance FMV, appraisal. other) EDUCATION 63,930 South America MATERIALS HEALTH CARE 1,413,520 South America

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) OTHER ASSISTANCE 510,318 South America PROGRAM SUPPLIES 544,352 South America MATERIAL

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (g) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) SERVICE 541,169 South America CONTRACTS CASH ASSISTANCE 11,672,337 South Asia

| Form 990 Schedu | le F Part III | - Grants an | Grants and Assistance to Individuals Outside The U S | | | | | |
|------------------------------------|---------------|-------------------------------|--|------------------------------------|---|--|--|--|
| (a) Type of grant or assistance | (b) Region | (c)Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) | |
| EDUCATION MATERIALS | South Asia | | 14,180 | | | | | |
| HEALTH CARE | South Asia | | 28,576 | | | | | |

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) OTHER ASSISTANCE | South Asia 33.919 PROGRAM SUPPLIES 5,508,521 188,514 | PROGRAM IFMV South Asia MATERIAL ISUPPLIES **IMATERIAL**

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 167,643 SERVICE South Asia CONTRACTS CASH ASSISTANCE 19.624.646 Sub-Saharan Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) EDUCATION 3,726,938 Sub-Saharan MATERIALS Africa HEALTH CARE 5,721,151 Sub-Saharan Africa

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or I (b) Region (c)Number (d) Amount of (e) Manner of cash (g) Description of (h) Method of (f) Amount of assistance cash grant disbursement non-cash non-cash valuation (book, FMV, appraisal, recipients assistance assistance other) OTHER ASSISTANCE |Sub-Saharan 276,563 Africa PROGRAM SUPPLIES 88.966,646 6.508.046 PROGRAM **IFMV** Sub-Saharan MATERIAL SUPPLIES Africa MATERIAL

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S (a) Type of grant or (b) Region (c)Number (d) Amount of (e) Manner of cash (f) Amount of (a) Description of (h) Method of assistance cash grant disbursement non-cash non-cash valuation (book, recipients assistance assistance FMV, appraisal, other) 7,426,299 SERVICE Sub-Saharan CONTRACTS Africa

DLN: 93493222020152

2020

OMB No. 1545-0047

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities
Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a. ►Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

| Depuru | iciic OI c | ne men | | .7 |
|----------|------------|---------|----|----|
| Internal | Revenu | e Servi | ce | |
| | | | | |
| | | | | |

(Form 990 or 990-EZ)

Name of the organization
INTERNATIONAL RESCUE COMMITTEE INC

Employer identification number

| | Form 990-EZ filers a | • | _ | | art. | orm 550, raic 10, mic 1 | .,, |
|-----|---|------------------------|--------------------------|--|--------------------------------------|--|---|
| 1 | Indicate whether the organiza | tion raised funds thro | ough any | of the fol | lowing activities. Check | all that apply. | |
| а | ✓ Mail solicitations | | | e | Solicitation of non | -government grants | |
| b | ✓ Internet and email solicita | tions | | f | Solicitation of gov | ernment grants | |
| c | Phone solicitations | | | g | Special fundraising | g events | |
| d | ✓ In-person solicitations | | | | | | |
| 2a | or key employees listed in For | m 990, Part VII) or e | ntity in | connection | n with professional fund | raising services? 🗸 Ye | es 🗆 No |
| b | to be compensated at least \$5 | | | uraisers) p | oursuant to agreements | under which the fundraise | 1 15 |
| (i) | Name and address of individual or entity (fundraiser) | (ii) Activity | fundrai custo cont | Did ser have ody or crol of outions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col. (i) | (vi) Amount paid to (or retained by) organization |
| | | Direct mail | 163 | NO | | | |
| | The Harrington Agency LLC 212 SChester Rd | Consultant | | No | | 972,855 | |
| | Swarthmore, PA 19081 | Advertising | | | | | |
| | Further LLC 181 Harry S Truman Pkwy Ste 265 | J | | No | | 922,296 | |
| | Annapolis, MD 21401 | | | | | | |
| | New Canvassing Experience Inc | Digital Fundraising | | No | | 286,140 | |
| | 78 San Marcos St | | | | | | |
| | Austin, TX 78702 | Fundraising Mail | | | | | |
| | Green Planet Sales Company Inc dba Threshold Giving 1526 Berlin Rd | r andraising man | | No | | 257,463 | |
| | Cherry Hill, NJ 08003 | Digital Fundraising | | | | | |
| | Digital Media Solutions LLC 101 6th Ave | Digital Fulldraising | | No | | 150,000 | |
| | New York, NY 10013 | Eundraising Mail | | 1 | | | |
| | Public Interest Communications Inc 7700 Leesburg Pike Ste 416-S | Fundraising Mail | | No | | 134,183 | |
| | Falls Church, VA 22043 | Disital Fundanisins | | | | | |
| | Gott Advertising LLC 191 Skyview Way | Digital Fundraising | | No | | 130,000 | |
| | San Francisco, CA 94131 | Consulting | | | | | |
| | GivePanel ta Nick Burne Consulting Ltd Kemp House 152 - 160 City Rd | Consuming | | No | | 102,288 | |
| | London, UK EC1V 2NX | | | | | | |
| | Forward Action Ltd 18 Gordon Rd | Consulting | | No | | 15,680 | |
| | Brentwood, UK CM15 8LR | | | | | | |
| | FAR Creative Inc 640 17th St | Consulting | | No | | 8,800 | |
| | Brooklyn, NY 11218 | | | | | | |
| Γot | al | | | . ▶ | | 2,979,705 | |
| | List all states in which the organicensing. | nization is registered | or licens | ed to solic | it contributions or has b | peen notified it is exempt f | rom registration or |

| | dule G (Form 990 or 990-EZ) 2020 rt III Fundraising Events. Complet | e if the organization a | answered "Yes" on For | m 990. Part IV. line 18 | Page 2 . or reported more |
|-----------------|---|----------------------------|---|----------------------------|--|
| | than \$15,000 of fundraising ev | ent contributions and | | | |
| | gross receipts greater than \$5, | (a)Event #1 | (b) Event #2 | (c)Other events | (d) Total events (add col. (a) through |
| | | Rescue Dinner (event type) | Salt lake office fundrasing (event type) | 1 (total number) | col. (c)) |
| Reversie | | | | | |
| | | 6,826,287 | 17,808 | 32,164 | 6,876,259 |
| | 2 Less: Contributions | 6,826,287 | 17,808 | | |
| | 3 Gross income (line 1 minus line 2) | 0,020,207 | 17,000 | 32,104 | 0,070,239 |
| | 4 Cash prizes | | | | |
| S | 5 Noncash prizes | | | | |
| Direct Expenses | 6 Rent/facility costs | | | | |
| Д Ф | 7 Food and beverages | | | | |
| t | 8 Entertainment | | | | |
| ă | 9 Other direct expenses | 23,103 | | 5,478 | 28,581 |
| | 10 Direct expense summary. Add lines 4 th | rough 9 in column (d) | | | 28,581 |
| | 11 Net income summary. Subtract line 10 f | | | • | -28,581 |
| Par | Gaming. Complete if the organ on Form 990-EZ, line 6a. | nization answered "Ye | s" on Form 990, Part I | .V, line 19, or reported | more than \$15,000 |
| Revenue | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col.(a) through col.(c)) |
| Re | 1 Gross revenue | | | | |
| Expenses | 2 Cash prizes | | | | |
| Хре | 3 Noncash prizes | | | | |
| Direct E | 4 Rent/facility costs | | | | |
| ◬ | 5 Other direct expenses | | | | |
| | | ☐ Yes% | ☐ Yes % | ☐ Yes % | |
| | 6 Volunteer labor | □ No | ☐ No | □ No | |
| | 7 Direct expense summary. Add lines 2 th | rough 5 in column (d) | | • | |
| | 8 Net gaming income summary. Subtract | line 7 from line 1, colum | n (d) | • | |
| 9 a | Enter the state(s) in which the organizatio Is the organization licensed to conduct gar | | | | □ Yes □ No |
| b | If "No," explain: | | | | |
| 10a b | Were any of the organization's gaming lice If "Yes," explain: | nses revoked, suspende | d or terminated during the | | ☐ Yes ☐ No |
| | | | | | |

| Sche | dule G (Form 990 or 990-EZ) 2020 | | | | Р | age 3 | | | |
|---------|--|---------------------------------|---|--------------|----------|--------------|--|--|--|
| 11 | Does the organization conduct gam | ing activities with nonmembe | ers? | Yes | □No | | | | |
| 12 | Is the organization a grantor, bene formed to administer charitable gai | | a member of a partnership or other entity | Yes | | | | | |
| 13 | Indicate the percentage of gaming | activity conducted in: | | | | | | | |
| а | The organization's facility | | | | | % | | | |
| b | An outside facility | | 13b | | | % | | | |
| 14 | Enter the name and address of the | person who prepares the org | anization's gaming/special events books and records: | | | | | | |
| | Name • | | | | | | | | |
| | Does the organization have a contrrevenue? | ract with a third party from wh | | · 🗌 Yes | □ No | | | | |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ | | | | | | | | |
| c | If "Yes," enter name and address of the third party: | | | | | | | | |
| | Name • | | | | | | | | |
| | Address • | | | | | | | | |
| 16 | Gaming manager information: | | | | | | | | |
| | Name ► | | | | | | | | |
| | Gaming manager compensation ► \$ | | | | | | | | |
| | Description of services provided > | | | | | | | | |
| | ☐ Director/officer | ☐ Employee | ☐ Independent contractor | | | | | | |
| 17 a | Mandatory distributions: Is the organization required under retain the state gaming license? | | distributions from the gaming proceeds to | · 🗌 Yes | Пло | | | | |
| b | | • | buted to other exempt organizations or spent | | | | | | |
| Par | in the organization's own exempt a rt IV Supplemental Informa | | * sations required by Part I, line 2b, columns (iii) a | and (v): a | nd Part | | | | |
| | | | plicable. Also provide any additional informatio | | | 3 | | | |
| | Return Reference | | Explanation | | | | | | |
| Part | II Line 6,7 and 9 | | ar, due to Covid-19 pandemic, the was no in person for rent/facility cost or food and beverage charges | undraising e | event. | | | | |

Schedule G (Form 990 or 990-EZ) 2020

efile GRAPHIC print - DO NOT PROCESS As Filed Data
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

2020
Open to Public

DLN: 93493222020152

Inspection

| ternal Revenue Service | | | | | | | |
|--|--|--|--|--|---|--|------------------------------------|
| ame of the organization NTERNATIONAL RESCUE COMMI | ITTEE INC | | | | | Employer identific | ation number |
| | | | | | | 13-5660870 | |
| | | and Assistance | | | | | |
| Does the organization mai the selection criteria used | | | | | | ce, and | ☑ Yes ☐ No |
| Describe in Part IV the org | • | - | _ | | | | |
| Part II Grants and Other that received more | Assistance to Don than \$5,000. Part II | nestic Organizations a can be duplicated if ad- | i nd Domestic Governme ditional space is needed. | ents. Complete if the o | rganization answered "Yes | " on Form 990, Part IV, line | 21, for any recipient |
| (a) Name and address of organization or government | (b) EIN | (c) IRC section (if applicable) | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
| 1) See Additional Data | | | | | | | |
| 2) | | | | | | | |
| 3) | | | | | | | |
| 4) | | | | | | | |
| 5) | | | | | | | |
| 5) | | | | | | | |
| 7) | | | | | | | |
| 3) | | | | | | | |
| 9) | | | | | | | |
| 10) | | | | | | | |
| 11) | | | | | | | |
| 12) | | | | | | | |
| 2 Enter total number of sect | | | | | | | 26 |
| Enter total number of othe | er organizations liste | a in the line I table. | | | | <u> </u> | 5 |

(Form 990)

Department of the

Treasury

Page 2

Schedule I (Form 990) 2020

(2) Education Program 553,663 1,836 School supplies (3) Health programming 1,112,840 1.146 Health Supplies

601,805 3,132 Supplies

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Schedule I (Form 990) 2020

Part III

Part I Line 1

(4) Power 18,692,472 631,873

(5) Safety Clothing and household items (5)

(6)

(7)

Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part IV

Return Reference Explanation

agreement and throughout the activity with the submission of periodic financial and programmatic reports as required per the grant agreement. Part I Line 2 IRC has detailed required procedures for monitoring the use of funds within the US including but not limited to reviewing programmatic and financial reports, on-site

IRC maintains records of all grants made from the pre-award / due diligence phase which determines the selection of the subgrantee, the signing of the grant

monitoring, visits, phones contacts as well as capacity building as required.

Part III Line B Number of recipients is noted it total for the year. During 2021, in the United States, the IRC helped resettle some 5391 newly arrived refugees and provided services

to promote self-reliance and integration to many refugees, asylees and victims of human trafficking and other immigrants.

Additional Data

API Chaya

PO Box 14047 Seattle, WA 98114 YouthCare

2500 NE 54th Street Seattle, WA 98105

Software ID: 20011406 **Software Version:** 20.0.2.0

EIN: 13-5660870

Name: INTERNATIONAL RESCUE COMMITTEE INC

93,316

25,926

| organization | ` ´ | if applicable | grant | cash | (book, FMV, appraisal, |
|------------------------------|-----|---------------|-------|------------|------------------------|
| - · J - · · · · · · . | | п аррпеавте | grant | | |
| or government | | | | assistance | other) |
| | | | | | |

501 C 3

501 C 3

91-1674016

91-0917079

| organization | if applicabl | e grant | cash | (book, FMV, appraisal, |
|---------------|--------------|---------|------------|------------------------|
| or government | | | assistance | other) |
| | | | | |

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organ (a) Name and address of (b) EIN uation (c) IRC section (d) Amount of car

| niza | tions and Domesti | ic Governments |
|------|--------------------|--------------------|
| ash | (e) Amount of non- | (f) Method of valu |

(g) Description of

non-cash assistance

Anti-Trafficking

(h) Purpose of grant

or assistance

Anti-Trafficking

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government WEAVE INC 94-2493158 501 C 3 86.062 Anti-Trafficking 2020 Hurley Way Sacramento, CA 95811 Catholic Charities Of Northeast 48-1181305 501 C 3 340.022 Refugee Programs

Kansas Inc

9720 West 87th Street Overland Park, KS 66212

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) Catholic Charities Of The Texas 75-0818147 501 C 3 745.870 Refugee Programs Panhandle 2801 Duniven Circle Amarillo, TX 79109 Catholic Charities Diocese Of 22-3759994 501 C 3 102.261 Refugee Programs

Camden

1845 Haddon Avenue Camden, NJ 08103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 13-4080201 501 C 3 646.358 Refugee Programs Church World Services Inc 475 Riverside Dr STE 700 New York, NY 10115 48-0543809 501 C 3 109.047 Refugee Programs

SAINT FRANCIS COMMUNITY SERVIC

509 East Elm Street Salina, KS 67401

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) Jewish Vocational Service of 22-1487229 501 C 3 115.212 Refugee Programs MetroWest Inc 111 Prospect street East Orange, NJ 07017 Washington Elementary School 86-6000484 23.364 Refugee Programs District 4650 West Sweetwater

Glendale, AZ 85304

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Phoenix Dream Center 86-1001113 501 C 3 67.697 Anti-Trafficking 3210 NW Grand Avenue

3210 NW Grand Avenue
Phoenix, AZ 85017

Streetlightusa 26-4359672 501 C 3 47.859

Anti-Trafficking

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO Box 6178 Peoria, AZ 85385

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 13-2574854 501 C 3 484.818 Refugee Programs Lutheran Immigration and Refugee Services 700 Light Street Baltimore, MD 21230 Catholic Charities of the 22-2164120 501 C 3 447.967 Refugee Programs

Archdiocese of Newark 590 N 7th St Newark, NJ 07107

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 47-3189855 501 C 3 69.262 Refugee Programs Survive and Thrive Advocacy Center Inc (STAC)

66.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 C 3

2121 Delta Blvd Tallahassee, FL 32303 Refugee Transitions (RT)

870 Market Street Suite 718 San Francisco, CA 94102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Catholic Charities of Southwest 48-0697602 501 C 3 64.717 Refugee Programs Kansas

19.023

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

| 906 Central Ave |
|----------------------|
| Dodge City, KS 67801 |
| |

Kansas City, KS 66101

Bethel Neighborhood Center 23-7098818 501 C 3
14 S 7th St Trafficway

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 74-2490334 28.057 Refugee Programs Glendale Union High School District 7650 N 43rd Avenue

211.906

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 C 3

Glendale, AZ 85301 Interfaith-RISE

19 South 2nd Avenue Highland Park, NJ 08904

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 45-3531020 501 C 3 44.612 Anti-Trafficking Real Escape From The Sex Trade 1200 S192nd St Suite 101

SeaTac, WA 98148

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Denver, CO 80208

University of Denver 84-0404231 146.449 Anti-Trafficking 2601 E Colorado Ave 1st Floor

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Yolo Food Bank 23-7111782 501 C 3 29.239 Refugee Programs 233 Harter Ave Woodland, CA 95776

86,353

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 C 3

86-0256667

A New Leaf

868 E University Dr Mesa, AZ 85203

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 65-0610872 501 C 3 17.761 Anti-Trafficking Americans for Immigrant lustice

5.640

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 C 3

| Sastice | |
|-------------------------|--|
| 6355 NW 36 St Ste 2201 | |
| Miami Springs, FL 33166 | |
| Echoes of Faith | |

4246 Swift Ave 1 San Diego, CA 92104

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Fresh Harvest 35-2442412 6.000 Refugee Programs 1480 BRADLEY GIN RD NW MONROE, GA 30656

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 C 3

Global Growers Network Inc.

500 South Columbia Dr Decatur, GA 30030

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government Mv Sister's House 68-0464114 501 C 3 36.400 Refugee Programs 3053 Freeport Blvd 120

Sacramento, CA 95818 94-2212241 501 C 3 23,004 Anti-Trafficking

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Ruby's Place 20880 Baker Rd

Castro Valley, CA 94546

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 66.595 Florida Department of Children I Refugee Programs and Families Office of Revenue

Management PO Box 2828

Tallahassee, FL 32304

| efil | le GRAPHIC pr | rint - DO NOT PROCESS | As Filed Dat | ta - | DLN: 9349 | 322 | 2020 | 152 |
|-------|---|--|--------------------|---|------------------------|------|----------------|------|
| Sch | nedule J | C | ompensat | tion Information | OME | No. | 1545-(| 0047 |
| (Forr | m 990) | For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. | | | | | |) |
| • | tment of the Treasury al Revenue Service | ► Go to <u>www.irs.go</u> | | r instructions and the latest informa | | | o Pul ectio | |
| Nar | me of the organiza | | | E | mployer identification | | | |
| INT | ERNATIONAL RESCU | E COMMITTEE INC | | | 3-5660870 | | | |
| Pa | rt I Questi | ons Regarding Compensa | ntion | | 3 3000070 | | | |
| | | | | | | | Yes | No |
| 1a | | | | of the following to or for a person listed only relevant information regarding these | | | | |
| | First-class | s or charter travel | \mathbf{Z} | Housing allowance or residence for pe | rsonal use | | | |
| | | · companions | 닏 | Payments for business use of persona | | | | |
| | | nification and gross-up paymen | | Health or social club dues or initiation | | | | |
| | ☐ Discretion | nary spending account | | Personal services (e.g., maid, chauffe | ur, chef) | | | |
| b | | | | n follow a written policy regarding paymo ove? If "No," complete Part III to explain | | 1b | Yes | |
| 2 | | | | or allowing expenses incurred by all | 1-3 | 2 | Yes | |
| | directors, truste | ees, officers, including the CEO/ | executive Directo | or, regarding the items checked on Line | lar | | | |
| 3 | | | | ed to establish the compensation of the | | | | |
| | | | | not check any boxes for methods CEO/Executive Director, but explain in | Part III. | | | |
| | , | - | | | | | | |
| | | ation committee ent compensation consultant | ✓ | Written employment contract Compensation survey or study | | | | |
| | | of other organizations | 7 | Approval by the board or compensation | on committee | | | |
| | | or other organizations | _ | Approval by the board of compensation | AT COMMISSION | | | |
| 4 | During the year related organiza | | 990, Part VII, Se | ection A, line 1a, with respect to the filir | ng organization or a | | | |
| а | Receive a sever | ance payment or change-of-cor | ntrol payment? . | | | 4a | Yes | |
| b | • | | • | lified retirement plan? | | 4b | Yes | |
| С | | | | ensation arrangement? | | 4c | | No |
| | ir res to any c | or lines 4a-c, list the persons an | id provide the ap | plicable amounts for each item in Part I | 11. | | | |
| | Only 501(c)(3 |), 501(c)(4), and 501(c)(29 |) organizations | s must complete lines 5-9. | | | | |
| 5 | For persons liste | ed on Form 990, Part VII, Section | on A, line 1a, did | the organization pay or accrue any | | | | |
| | compensation c | ontingent on the revenues of: | | | | | | |
| а | The organization | n? | | | | 5a | | No |
| b | | | | | | 5b | | No |
| _ | • | 5a or 5b, describe in Part III. | | | | | | |
| 6 | | ed on Form 990, Part VII, Section ontingent on the net earnings o | | the organization pay or accrue any | | | | |
| a | - | n? | | | _ | 6a | | No |
| b | , , | | | | | 6b | | No |
| _ | · · | 6a or 6b, describe in Part III. | A 12 A 12 I | | | | | |
| 7 | payments not d | escribed in lines 5 and 6? If "Ye | s," describe in Pa | the organization provide any nonfixed art III | | 7 | Yes | |
| 8 | subject to the in | nitial contract exception describe | ed in Regulations | ured pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," des | | 8 | | No |
| 9 | | | | e presumption procedure described in Re | | 9 | | 110 |
| For F | Paperwork Redu | uction Act Notice, see the Ins | structions for F | orm 990. Cat. No. 500 | 053T Schedule J (| Form | 990) | 2020 |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

| (A) Name and Title | | | m 990, Part VII, Se kdown of W-2 and/o | | | (D) Nontaxable | | (F) |
|---------------------------|--|--|---|---|--------------------------|----------------|------------|---|
| (A) Name and Title | | (B) blea | compensation | 1099-MISC | and other | benefits | columns | Compensation in |
| | | compensation Bonus & incentive reporta | | (iii) Other reportable compensation | deferred compensation | | (B)(i)-(D) | column (B) reported as deferred on prio Form 990 |
| See Additional Data Table | | | | | | | | |
| | | | | | | | | |
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| Schedule J (Form 990) 2020 Part III Supplemental Information | | | | | | |
|---|---|--|--|--|--|--|
| | | | | | | Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. |
| Return Reference | Explanation | | | | | |
| Part I Line 4a | During the reporting period Amanda Seller paid severance amounting 82,376. This amount is reported on Schedule J Part II, Column B iii | | | | | |
| Part I Line 4b | David Miliband participates in a supplemental non-qualified retirement plan. During the reporting period IRCs 457f contribution was of 47,575. This amount is reported on Schedule J Part II, Column B iii | | | | | |
| Part I Line 1a | During the reporting period a housing allowance of 50,000 paid to David Miliband. The compensation committee of the board of directors approved the allowance. This amount is reported in Schedule J, Part II, Column Biii | | | | | |
| Part I Line 7 | During the reporting period a bonus of 100,000 paid to David Miliband. The compensation committee of the board of directors approved the bonus. This amount is reported in Schedule J, Part II, Column Bii | | | | | |
| Part I Line 2 | IRC provides a housing allowance and grosses up payments for certain amounts paid for the president pursuant to his employment contract. Such amounts are included in other reportable compensation on Schedule J, Part II, ColumnBiii. | | | | | |

Schedule 1 (Form 990) 2020

Additional Data

GPPS

11Kelly Moody Vice President, USA

(ii)

Philanthropy

262,445

Software ID: 20011406

Software Version: 20.0.2.0

EIN: 13-5660870

Name: INTERNATIONAL RESCUE COMMITTEE INC

(E) Total of columns

(F) Compensation in

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title

(B) Breakdown of W-2 and/or 1099-MISC compensation

(C) Retirement and

(D) Nontaxable

| (A) Name and Title | | (b) breakdown | 01 W-2 and/01 1099-14150 | Compensation | (C) Retirement and | (D) Nontaxable | (B)(i)-(D) | column (B) reported as deferred on prior Form 990 |
|--|------|------------------------|-------------------------------------|---|--------------------------------|----------------|------------|---|
| | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | | |
| 1David Miliband Dir/CEO/Pres | (i) | 709,423 | 100,000 | 197,920 | 29,925 | 25,287 | 1,062,555 | |
| (| (ii) | | | | | | | |
| CFO, SVP Finance, Treasurer (ii) | (i) | 377,367 | | | 29,925 | 24,833 | 432,125 | |
| | (ii) | | | | | | | |
| General Counsel, Secretary | (i) | 340,825 | | | 29,925 | 18,578 | 389,328 | |
| | (ii) | | | | | | | |
| SVP International Programs | (i) | 311,920 | | | 29,925 | 24,694 | 366,539 | |
| | (ii) | | | | | | | |
| SVP US Programs | (i) | 348,279 | | | 32,775 | 9,863 | 390,917 | |
| | (ii) | | | | | | | |
| Amanda Seller until | (i) | 108,133 | | 82,376 | 8,397 | 2,520 | 201,426 | |
| | (ii) | | | | | | | |
| 6 Madlin J Sheerman Senior Vice President, | (i) | 384,536 | | 5,160 | 27,075 | 24,832 | 441,603 | _ |
| Operations Strategy (| (ii) | | | | | | | |
| Chief Information Officer | (i) | 332,720 | | | 29,925 | 18,562 | 381,207 | |
| | (ii) | | | | | | | |
| Chief HR Officer | (i) | 320,575 | | | 29,925 | 24,859 | 375,359 | |
| | (ii) | | | | | | | |
| Chief Ethics and | (i) | 297,616 | | | 22,717 | 9,754 | 330,087 | |
| | (ii) | | | | | | | |
| 10Ourania Dionysiou Vice President , IPP and | (i) | 288,033 | | | 22,879 | 9,925 | 320,837 | |

24,621

13,948

301,014

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493222020152 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** INTERNATIONAL RESCUE COMMITTEE INC 13-5660870 **Types of Property** (a) (b) (c) (d) Check if Method of determining Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household 1,021,201 FMV/Receipts Χ goods Cars and other vehicles Χ 619,621 FMV/Receipts Boats and planes . . Intellectual property . . Securities-Publicly traded . 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Oualified conservation contribution-Historic structures . . . Qualified conservation contribution-Other . Real estate—Residential Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . 18 19 Food inventory . . . Χ 4,078,675 FMV/Receipts **20** Drugs and medical supplies 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . 24 Archeological artifacts . . 1,790,053 FMV/Receipts Other ▶ (Fuel and Parts) Χ Χ 1,899,791 FMV/Receipts Emergency 26 Other ▶ (Kit Χ 708,510 FMV/Receipts 27 Other ▶ (Advertising) Х 263,769 FMV/Receipts Generator and 28 Other ▶ (other Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 31 Yes Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2020)

| Page : | | | | |
|---|--|--|--|--|
| Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. | | | | |
| Return Reference | Explanation | | | |
| Part I Line 20, 25-28 | The number of contributions is difficult to confirm as the same donor will make various contributions throughout the project in tranches as needed to support their grant funded program implementation and the individual contributions are received at the field level in our various country offices. The detailed documentation is held at the different office locations throughout the 40 countries we work in including our US program offices. The number of individual contributions of goods would easily number in the 100s of thousands of items. HQ does not track to that level of detail but has all of the supporting documentation and invoices utilized for valuation and recording in the US and country locations. | | | |
| | Schedule M (Form 990) (2020) | | | |

| efile GRAPH | IC print - DO NOT PROCESS | DLN | l: 93493222020152 |
|---------------------------------------|--|--|--------------------------------|
| SCHEDUL | E O Occasione antal Information to Form 200 | 000 F7 | OMB No. 1545-0047 |
| (Form 990 or EZ) Department of the T | Complete to provide information for responses to specific of Form 990 or 990-EZ or to provide any additional information for meaning the specific of Form 990 or 990-EZ. | questions on mation. | 2020 Open to Public Inspection |
| Namel Betherose | | Employer iden | tification number |
| INTERNATIONAL R | ESCUE COMMITTEE INC | 13-5660870 | |
| Return Reference | Explanation | | |
| Form 990, Part III, Line 4d | Program Service Expenses 92,251,523, Grants and allocations 50,243,855, Revent Asia, the IRC responded to the health needs of internally displaced persons, refuge d host communities across Afghanistan, Bangladesh, Myanmar, Pakistan, and Thai hanistan, the IRC intervened to respond to the collapse of local economies and ensity of staff in the change of local power. In Myanmar, the IRC supported hard-to-read lations through the delivery of health, livelihoods, and economic recovery programs, n Thailand, the IRC continued to provide reproductive health services to individuals amilies residing in camps. | es, an land. In Afg ure safe ch popu and i | |

| Return Reference | Explanation |
|---------------------|--|
| Form 990, | Program Service Expenses 87,054,897, Grants and allocations 9,420,948, Revenue 0 IRC emplo |
| Part III, Line | yed expert staff and advisors in sectors including Economic Recovery and Development, Heal |

Part III. Line th, Governance, Education, and Violence Prevention and Response. The IRC maintained units that provided logistical and administrative support to the country programs listed above a nd advanced Gender Equality Diversity, and Inclusion as well as ensuring innovation and da ta-informed decision-making. Finally, the IRCs Emergency Response team, which operated in Afghanistan at the height of crisis, lent surge support and expertise to IRC teams across the alobe.

Return Explanation

Form 990,
Program Service Expenses 893,689, Grants and allocations 225,129, Revenue 0 In FY21, RAI E
urope worked across Europe to assist refugees and asylum seekers in camps and urban areas.
In Greece, Serbia. Italy, Germany and the UK, the IRC supported the government and local
organizations to implement migrant integration programs.

| Explanation |
|--|
| Program Service Expenses 19,132,379, Grants and allocations 9,620,673, Revenue 387,702 In Latin America, the IRC provided assistance to vulnerable migrant and asylum seekers fleein |
| |

g economic instability and violence in El Salvador, Honduras, Guatemala. In collaboration with our US programs, we supported families at the US/Mexico border establishing a Women a nd Girls Safe Space alongside local partners. In response to the Venezuela crisis, the IRC in Colombia provided child protection and reproductive and primary health services to wom en and families in need, working with partners in Peru and Ecuador to reach the growing ne ed.

990 Schedule O, Supplemental Information Explanation

| Reference | Explanation |
|-----------------------------|--|
| Form 990, Part I, Line 5 | IRCs global workforce is approximately 15,000 employees. The 3,152 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriat e employees. The remaining approximate 12,000 staff are national staff paid in-country via local payroll systems and pay into local tax systems of their respective country location s. |

| Return Reference | Explanation |
|---------------------------------|--|
| Form 990, Part V, Line 2a | IRCs global workforce is approximately 15,000 employees. The 3,152 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriat e employees. The remaining approximate 12,000 staff are national staff paid in-country via local payroll systems and pay into local tax systems of their respective country location s. |

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Line 11b

The form 990 and all related schedules are prepared by the Associate Controller. The legal team is consulted for relevant disclosures and the 990 is reviewed with the CFO and CEO.
The Form 990 is distributed electronically to all members of the Board of Directors prior to filing electronically on the due date.

Return

| Form 990, Part VI, Section B, Line 12c Per IRCs Conflict of Interest Policies, anyone who is in a position to influence IRC polic ies or actions has a duty to disclose any potential conflict to IRCs General Counsel. IRCs Audit Committee will then review the facts, including whether IRC can obtain an alternati ve transaction that would not pose a conflict. The Audit Committee will decide whether the transaction is in IRCs best interest and whether it is fair and reasonable, and shall acc ordingly decide whether to allow the transaction to proceed. Pursuant to IRCs Code of Cond uct and Conflict of Interest Policies, all other staff have a duty to report any potential conflict to their supervisor or to IRCs Ethics and Compliance Unit. Senior management will | |
|---|--|

I review the facts, including whether an alternative transaction would be possible that wo uld not pose a conflict of interest. Senior management will decide whether the transaction

is permissible and whether mitigating controls should be implemented.

Explanation

| Return Reference | Explanation |
|--|--|
| Form 990, Part VI, Section B, Line 15 | The IRC Board of Directors established a Board Compensation Committee in Nov. 2004. Pursua nt to IRC Bylaws and Board Governance Guidelines, Committee members are nominated by the N ominating and Governance Committee and presented to the full Board for approval at the IRC Board Meetings. All Compensation Committee members are independent, uncompensated members of the Board. The Compensation Committee meets annually to review the performance of and determine compensation for the President and CEO. In addition, the Committee reviews compensation for the senior executive team which includes Officers and Key Employees. An experienced, independent consultant is engaged to compile comparative compensation data, compensation ranges and related matters. The consultant also presents to the Committee a review of Intermediate Sanctions rules, any changes in those rules in the preceding year and the manner in which the Compensation Committee needs to proceed in order to be compliant. The consultant makes a presentation verbally, in person, to the Committee, as well as in the form of a written report. The Compensation Committee maintains a record of its review and determinations in Committee meeting minutes. |

990 Schedule O, Supplemental Information

Return
Reference

Explanation

| Form 990, | A copy of IRCs latest financial statements are available to the public on its website, www |
|------------|--|
| Part VI, | rescue.org. In addition, IRCs governing documents, conflict of interest policy and financ |
| Section C, | ial statements may be obtained by contacting IRC directly in writing at International Resc |
| Line 19 | ue Committee, Inc. 122 East 42nd Street, NY, NY 10168, or by phone at 1-877-REFUGEE. In ad |
| | dition, IRCs financial reports are available by contacting any of the state agencies that |
| | collect copies of our financial statements with our charitable solicitation registrations. |

Return Explanation
Reference

Form 990,
Part XI, Line

In the Reconciliation of Net Assets, the amount on Line 9 represents the change in value o
f split interest agreements 497,708 ,exchange rate gain 5,201,355 and restatement of begin
ning of year net assets to remove wholly-owned subsidiaries 12,379,949

| efile GRAPHIC print - De | O NOT PROCESS | As Filed Data - | | | | | | | | | | DLN: 93493 | 222020 | 152 |
|--|--|---------------------------------------|------------------|----------------------------|------------------------|-----------------------------------|----------------------------------|------------------|----------|---------------------------------------|---------|--|-----------------------------|---------------------------|
| SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service | > (| Related (Complete if the organ | nization ar | | " on Form Form 990. | 990, Part | IV, line 33 | 34, 35b | | 37. | | OMB No. | 20 | |
| Name of the organization INTERNATIONAL RESCUE COMMITTE | E INC | | | | | | | | Emp | loyer identif | icatior | | | |
| | | | | | | | | | | 660870 | | | | |
| Part I Identification | n of Disregarded E | intities. Complete if | the organ | nization ansv | vered "Yes | s" on Form | າ 990, Part | : IV, line 3 | 33. | | | | | |
| Name, address, and | (a) d EIN (if applicable) of disr | egarded entity | | (b) Primary a | | Legal dom or foreigr | c) icile (state n country) | (d) Total inc | ome | (e) End-of-year as | sets | (f Direct co ent | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | of Related Tax-Ex npt organizations di | empt Organization uring the tax year. | ns. Compl | ete if the org | ganization | answered | l "Yes" on | Form 990 | , Part I | V, line 34 be | ecause | it had one or | more | |
| Name, address, ar | (a) nd EIN of related organizat | ion | Prim | (b) ary activity | Legal dom | c) nicile (state n country) | (d) Exempt Cod | | | (e) harity status on 501(c)(3)) | Dii | (f) rect controlling entity | Section (13) cor enti | 512(b) ntrolled ty? |
| | | | | | | | | | | | | | Yes | No |
| | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | |
| For Panerwork Peduction A | ot Notice cas the T- | structions for Ecres | 100 | | <u></u> | t No 5013 | PEV | | | | د ماء | adula P (Form | 000) 20 | 20 |

| (a) Name, address, and EIN o related organization | of | (b) Primary activity | (c) Legal domicile (state or foreign country) | (d) Direct controlling entity | (e) Predominant income(related unrelated, excluded from tax under sections 512-514) | (f) Share of total income | (g) Share of end-of-year assets | Disprop alloca | n) rtionate tions? | (i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065) | manag partne | lor Per ing ow | (k) rcenta vners |
|---|----------------------|-----------------------------------|---|--|---|---|--|-------------------|----------------------------------|---|------------------------|------------------------|------------------------|
| | | | | | 311) | | | Yes | No | | Yes | No | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| Identification of Related Organ | | | | | | ization ans | wered "Ye | s" on F | orm 9 | 990, Part I\ | /, line | 34 | |
| (a) Name, address, and EIN of related organization | (b) Primary activity | l do (state | (c) Legal pmicile or foreign untry) | Direct | (d) t controlling Type entity (C co | (e) e of entity orp, S corp, or trust) | (f) Share of total income | | (g) of end- year assets | -of- Perce | h) entage ership | Sectio (13) c er | cont ntity |
| | | | uncry) | | | | | | | | | Yes | • |
| | | | | | | | | | | | | | |
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(1)IRC Hellas

(2)IRC Deutschland gGmbh

(3)IRC Deutschland gGmbh

(4)International Rescue Committee Sverige Insamlingsstiftelse

| Scriedule k (Form 990) 2020 | | Pa | age 3 |
|--|------------|----------|-------|
| Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. | | | |
| Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. | | Yes | No |
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? | | | |
| a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity | 1a | | No |
| b Gift, grant, or capital contribution to related organization(s) | 1 b | Yes | |
| c Gift, grant, or capital contribution from related organization(s) | 1c | Yes | |
| d Loans or loan guarantees to or for related organization(s) | 1 d | | No |
| e Loans or loan guarantees by related organization(s) | 1e | | No |
| f Dividends from related organization(s) | 1 f | | No |
| g Sale of assets to related organization(s) | 1 g | | No |
| h Purchase of assets from related organization(s) | 1h | | No |
| i Exchange of assets with related organization(s) | 11 | | No |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1 j | | No |
| , Leave of Nacinates, equipment, of earlier assess to foliated of gametation (e), i.e., i. | - | <u> </u> | T |
| | | | |

| d Loans or loan guarantees to or for related organization(s) | 1d | No |
|--|------------|----|
| e Loans or loan guarantees by related organization(s) | 1e | No |
| f Dividends from related organization(s) | 1f | No |
| g Sale of assets to related organization(s) | 1 g | No |
| h Purchase of assets from related organization(s) | 1h | No |
| i Exchange of assets with related organization(s) | 1 i | No |
| j Lease of facilities, equipment, or other assets to related organization(s) | 1j | No |
| | | |
| k Lease of facilities, equipment, or other assets from related organization(s) | 1k | No |

| | , | | | | | | | | |
|--|---|------------|----------|--|--|--|--|--|--|
| f Dividends from related organization(s) | | 1f | No | | | | | | |
| g Sale of assets to related organization(s) | | 1 g | No | | | | | | |
| h Purchase of assets from related organization(s) | | 1h | No | | | | | | |
| i Exchange of assets with related organization(s) | | 1i | No | | | | | | |
| ${f j}$ Lease of facilities, equipment, or other assets to related organization(s) | | 1j | No | | | | | | |
| | | | <u> </u> | | | | | | |
| k Lease of facilities, equipment, or other assets from related organization(s) | | 1K | No | | | | | | |
| l Performance of services or membership or fundraising solicitations for related organization(s) | | | | | | | | | |
| m Performance of services or membership or fundraising solicitations by related organization(s) | | 1m | No | | | | | | |
| n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) | | | | | | | | | |
| o Sharing of paid employees with related organization(s) | | 1o Yes | | | | | | | |
| | | | | | | | | | |
| p Reimbursement paid to related organization(s) for expenses | | 1 p | No | | | | | | |
| q Reimbursement paid by related organization(s) for expenses | | 1 q | No | | | | | | |

(b) Transaction

type (a-s)

(c) Amount involved

5,400,005

2,354,440

63,947,508

3,239,119

Cash

Cash

Cash

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

1r Yes

1s

Schedule R (Form 990) 2020

(d) Method of determining amount involved

Yes

(a) Name of related organization

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| (a) Name, address, and EIN of entity | (b) Primary activity | domicile | (d) Predominant income (related, unrelated, excluded from tax under sections 512-514) | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | section 501(c)(3) organizations? | | (f) Share of total income | end-of-year | (h) Disproprtionate allocations? | | (i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) | ox managing partner? | | (k) Percentage ownership | |
|--|--------------------------------|----------|---|----------------------------------|----|----------------------------------|--|--|----|----------------------------------|-----------|------------------------------------|-------------|----------------------------------|--|---|----------------------|--|--------------------------------|--|
| | | | 314) | Yes | No | | | Yes | No | | Yes | No | | | | | | | | |
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| chedule R (Form 990) 2020 | | | | | | | | |
|--|-------------------|-------------|--|--|--|--|--|--|
| Part VII | Supplemental Info | nformation | | | | | | |
| Provide additional information for responses to questions on Schedule R. (see instructions). | | | | | | | | |
| Return Reference | | Explanation | | | | | | |
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